05/15/2008 10:27

Image# 28931533419

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines American College of Radiology Association 1891 Preston White Drive ADDRESS (number and street) Check if different than previously Reston ٧A 20191 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00343459 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 04 0 1 2008 04 30 2008 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. DR Milton Guiberteau Type or Print Name of Treasurer Electronically Filed by DR Milton Guiberteau 05 15 2008 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name American College of Radiology Association D D D D 0.4 0 1 2008 0.4 3 0 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 2008 398231.39 January 1 (b) Cash on Hand at 357367.10 Begining of Reporting Period 81343.60 354075.16 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 438710.70 752306.55 6(a) and 6(c) for Column B) 136881.43 450477.28 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 301829.27 301829.27 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name
American College of Radiology Association

Report Covering the Period:

м м 0 4

From:

01

2008

0 4

^D 3^D 0

^Y 2008

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From: (a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	71110.83	302998.43
(ii) Unitemized	9695.12	48049.47
(iii) TOTAL (add Lines 11(a)(i) and (ii)	80805.95	351047.90
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)(d) Total Contributions (add Lines	0.00	0.00
11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	80805.95	351047.90
Transfers From Affiliated/Other Party Committees	0.00	0.00
3. All Loans Received	0.00	0.00
Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
to Federal candidates and Other Political Committees	0.00	0.00
7. Other Federal Receipts (Dividends, Interest, etc.)	537.65	3027.26
8. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	81343.60	354075.16
Total Federal Receipts (subtract Line 18(c) from Line 19)	81343.60	354075.16

DETAILED SUMMARY PAGE

of Disbursements

Page 4

FEC Form 3X (Rev. 02/2003)

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures: (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating Expenditures	0.00	0.00
	(c) Total Operating Expenditures	0.00	0.00
2.	(add 21(a)(i), (a)(ii) and (b))	0.00	0.00
3.	Committees	0.00	0.00
	Federal Candidates/Committees and Other Political Committees	136000.00	446500.00
	Independent Expenditure (use Schedule E)	0.00	0.00
5.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
	Loan Repayments Made	0.00	0.00
	Loans Made	0.00	0.00
	Refunds of Contributions To: (a) Individuals/Persons Other	0.00	0.00
	Than Political Committees		
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds	0.00	0.00
	(add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	881.43	3977.28
0.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6) (i) Federal Share	0.00	0.00
	· ·	0.00	0.00
	(ii) "Levin" Share		
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	136881.43	450477.28
<u>.</u>	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	100001 40	450477.00
	from Line 31)	136881.43	450477.28

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	80805.95	351047.90
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	80805.95	351047.90
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FE6AN026

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	(Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6/90 (check only one)
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	not be sold or used by any personal ress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Radiology Ass			
Full Name (Last, First, Middle Initial) Dr. Richard Benator			Date of Receipt
Mailing Address 4951 Bacopa Ln S	Unit 701A		0 4 0 4 2 0 0 8
City Saint Petersburg	State FL	Zip Code 33715-2616	Transaction ID: 24177704 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer Florida Pediatric Associa- tion	Occupation Diagnosti	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Alan Holz	I		Date of Receipt
Mailing Address 10471 Lone Star PI	04 04 2008		
City	State FL	Zip Code	Transaction ID: 24177706
Davie FEC ID number of contributing federal political committee.	C	33328-1344	Amount of Each Receipt this Period 250.00
Name of Employer Radiology Associates of Hollywood	Occupation Diagnosti	n ic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Edgar Colon-Negron			Date of Receipt
Mailing Address Urb Montehiedra 247 Calle Reina Mo	ora		04 04 2008
City San Juan	State PR	Zip Code 00926-7108	Transaction ID: 24177708 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	00320-7100	1000.00
Name of Employer CLAG Imaging Center	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify)		Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>		2250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 90 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	Statements mage name and add	 y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
American College of Radiology Assoc	ciation		
Full Name (Last, First, Middle Initial) Dr. Lloyd Logue			Date of Receipt
Mailing Address 3943 Indian Springs F			04 04 2008
City	State	Zip Code	Transaction ID: 24177711
Panama City	<u>FL</u>	32404-5794	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		200.00
Name of Employer Bay Radiology Associates,	Occupatio	n ic Radiologist	
P.A. Receipt For:	_ · · · · ·	e Year-to-Date	\dashv
Primary General	Aggregate	: rear-lo-Dale ♥	7
Other (specify)	0 0	800.00	1
Full Name (Last, First, Middle Initial) Dr. Gregory Presser			Date of Receipt
Mailing Address 706 Bunkers Cove Ro	d		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 24177712
Panama City	FL	32401-3920	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		200.00
Name of Employer Bay Radiology Associates, P.A.	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 800.00	
Full Name (Last, First, Middle Initial) Dr. Carl Bailey, JR	1		Date of Receipt
Mailing Address 710 Bunkers Cove Ro	t		04 04 2008
City	State	Zip Code	Transaction ID: 24177713
Panama City	FL	32401-3920	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		200.00
Name of Employer Bay Radiology Associates	Occupatio Diagnost	n ic Radiologist	
Receipt For:	Aggregate	e Year-to-Date	
Primary General Other (specify) ▼	0 0	800.00	
SUBTOTAL of Receipts This Page (optional) .			600.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 90 (check only one) X 11a
An	for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perse name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
	American College of Radiology Associ	ciation	
٠.	Full Name (Last, First, Middle Initial) Dr. Scott Ramey	D.	Date of Receipt
	Mailing Address Bay Radiology Assoc PO Box 1770	PA	04 04 2008
	City	State Zip Code	Transaction ID: 24177714
	Panama City	FL 32402-1770	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	200.00
	Name of Employer Bay Radiology Associates, P.A.	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	800.00	
_	Full Name (Last, First, Middle Initial) Dr. James Strohmenger		Date of Receipt
	Mailing Address Bay Radiology Associ PO Box 1770	ates State Zip Code	04 04 2008
	City Panama City	Transaction ID: 24177715	
	Panama City FEC ID number of contributing federal political committee.	FL 32402-1770	Amount of Each Receipt this Period 200.00
	Name of Employer Bay Radiology Associates	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	800.00	
	Full Name (Last, First, Middle Initial) Dr. Carol Rumack		Date of Receipt
	Mailing Address UCD-HSC 4200 E 9th Ave C293		0 4 1 4 2 0 0 8
	City	State Zip Code	Transaction ID: 24330246
	Denver	CO 80262-0001	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		2500.00
	Name of Employer Univ of Colorado School of Medecine	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	_
	Primary General Other (specify) ▼	2500.00	
		1	2900.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 90 (check only one) X 11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Asso	Statements may not be sold or used by any persone name and address of any political committee to ciation	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Kim Podolnick Mailing Address 8015 164th St City Jamaica FEC ID number of contributing federal political committee. Name of Employer Hillcrest Radiology Associates Receipt For: Primary General Other (specify)	State Zip Code NY 11432-1116 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 500.00	Date of Receipt M M M J D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. W Lawrence Greif Mailing Address 130 Box Oak City San Antonio FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Group, P.A. Receipt For: Primary General Other (specify)	State Zip Code TX 78230-5628 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 500.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. G Christopher Hammet Mailing Address 231 W Lynwood Ave City San Antonio FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Group, P.A. Receipt For: Primary General Other (specify)	State Zip Code TX 78212-2323 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 500.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		1500.00

SCHEDULE A (FEC Form SITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 90 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology A	and Statements may not be sold or used by any person ng the name and address of any political committee to association	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. David Golden Mailing Address 411 Happy Trail City San Antonio FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Group Receipt For: Primary General	State Zip Code TX 78231-1440 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Mark Healy Mailing Address 207 Blackjack Oa City San Antonio	1000.00 ak State Zip Code TX 78230-5617	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Group, P.A. Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.00	1000.00
Full Name (Last, First, Middle Initial) Dr. John Stoll Mailing Address 110 Cherokee Ln City San Antonio FEC ID number of contributing	State Zip Code TX 78232-2902	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary Other (specify)	Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.00	
	onal)	3000.00

City San Antonio TX 78209-5909 FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Group-P.A. Receipt For: Primary Other (specify) Name of Employer South Texas Radiology Group-P.A. PEC ID number of contributing federal political committee. Primary Other (specify) State Tip Code TX 78232-3508 FEC ID number of contributing federal political committee. PEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Group-P.A. Receipt For: Primary Other (specify) Tansaction ID: 24336444 Amount of Each Receipt to 1000.00 Date of Receipt Tansaction ID: 24336445 Amount of Each Receipt to 1000.00 Diagnostic Radiologist Receipt For: Primary Other (specify) Full Name (Last, First, Middle Initial) Dr. Steven Wegert Mailing Address 307 Branch Oak Way City State Tip Code Tx 78230-5607 Transaction ID: 24336446 Amount of Each Receipt to 1000.00 Date of Receipt Tx 78230-5607 Transaction ID: 243364444 Amount of Each Receipt to 1000.00	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Benorts and S	Use separate schedule(for each category of the Detailed Summary Page	X 11a
Dr. Alvin Thaggard. III Mailing Address 104 Cross Ln City San Antonio TX 78209-5909 FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Group, P.A. Receipt For: Primary General Other (specify) ▼ Transaction ID: 24336444 Amount of Each Receipt this Primary General Date of Receipt Transaction ID: 24336444 Amount of Each Receipt this Primary General Date of Receipt Transaction ID: 24336444 Amount of Each Receipt this Primary General Date of Receipt Transaction ID: 24336445 Amount of Each Receipt this Primary General Date of Receipt Transaction ID: 24336445 Amount of Each Receipt this Primary General Date of Receipt Transaction ID: 24336445 Amount of Each Receipt this Primary General Date of Receipt Transaction ID: 24336445 Amount of Each Receipt this Primary General Date of Receipt Transaction ID: 24336445 Amount of Each Receipt this Primary General Date of Receipt Transaction ID: 24336445 Amount of Each Receipt this Primary General Date of Receipt Transaction ID: 24336445 Amount of Each Receipt this Primary General Date of Receipt Transaction ID: 24336445 Amount of Each Receipt this Primary General Date of Receipt Transaction ID: 24336446 Amount of Each Receipt this Primary General Date of Receipt Transaction ID: 24336446 Amount of Each Receipt this Primary General Date of Receipt Transaction ID: 24336446 Amount of Each Receipt this Primary General Date of Receipt Transaction ID: 24336446 Amount of Each Receipt this Primary General Date of Receipt Transaction ID: 24336446 Amount of Each Receipt this Primary General Date of Receipt Transaction ID: 24336446 Amount of Each Receipt this Primary General Date of Receipt Transaction ID: 24336446 Amount of Each Receipt this Primary General Date of Receipt Transaction ID: 24336446 Amount of Each Receipt this Primary General	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	name and address of any political commi	ttee to solicit contributions from such committee.
City State Zip Code San Antonio TX 78299-5999 FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Group, P.A. Receipt For: Primary General Other (Last, First, Middle Initial) Dr. John Thomas Mailing Address 13651 Treasure Trail Dr City San Antonio TX 78232-3508 FEC ID number of contributing federal political committee. Date of Receipt Transaction ID: 24336445 Amount of Each Receipt this P Date of Receipt Transaction ID: 24336445 Amount of Each Receipt this P Date of Receipt Transaction ID: 24336445 Amount of Each Receipt this P Date of Receipt Transaction ID: 24336445 Amount of Each Receipt this P Transaction ID: 24336445 Amount of Each Receipt this P Date of Receipt Transaction ID: 24336445 Amount of Each Receipt this P Transaction ID: 243364446 Amount of Each Receipt this P Date of Receipt Transaction ID: 24336446 Transaction ID: 24336446 Amount of Each Receipt this P Date of Receipt Transaction ID: 24336446 Transaction ID: 24336446 Amount of Each Receipt this P Date of Receipt Transaction ID: 24336446 Amount of Each Receipt this P Transaction ID: 243364444 Amount of Each Receipt this P Transaction ID: 243364444 Transaction ID: 243364446 Transaction ID: 24336446 Transact	Dr. Alvin Thaggard, III		
San Antonio TX 78299-5909 Amount of Each Receipt this P FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Gro- Up. P. A. Receipt For: Aggregate Year-to-Date ▼ Transaction ID: 24336445 Amount of Each Receipt this P Date of Receipt TX 7829-5909 Amount of Each Receipt this P 1000.00 Date of Receipt TX 78232-3508 FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Gro- Up. P. A. Receipt For: Primary General Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Transaction ID: 24336445 Amount of Each Receipt this P Transaction ID: 24336445 Amount of Each Receipt this P Date of Receipt Transaction ID: 24336445 Amount of Each Receipt this P Transaction ID: 24336446 Amount of Each Receipt this P Transaction ID: 24336446 Amount of Each Receipt this P Transaction ID: 24336446 Amount of Each Receipt this P Transaction ID: 24336446 Amount of Each Receipt this P Transaction ID: 24336446 Amount of Each Receipt this P Transaction ID: 24336446 Amount of Each Receipt this P Transaction ID: 24336446 Amount of Each Receipt this P Transaction ID: 24336446 Amount of Each Receipt this P Transaction ID: 24336446 Amount of Each Receipt this P Transaction ID: 24336446 Amount of Each Receipt this P Transaction ID: 24336446 Amount of Each Receipt this P Transaction ID: 24336446 Amount of Each Receipt this P Transaction ID: 24336446 Amount of Each Receipt this P Transaction ID: 24336446 Amount of Each Receipt this P Transaction ID: 24336446 Amount of Each Receipt this P Transaction ID: 24336446 Amount of Each Receipt this P Transaction ID: 24336446 Amount of Each Receipt this P	Mailing Address 104 Cross Ln		
FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Group. P.A. Receipt For: Primary General Other (specify) ▼		•	Transaction ID: 24336444
Same of Employer South Texas Radiology Group. P.A. Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Transaction ID: 24336445	San Antonio	TX 78209-5909	Amount of Each Receipt this Period
up. P.A. Receipt For:		C	1000.00
Receipt For: Primary	Name of Employer South Texas Radiology Gro-		
Primary General Other (specify) ▼	up, P.A. Receipt For:	,	
Date of Receipt Mailing Address 13651 Treasure Trail Dr City San Antonio TX 78232-3508 FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Group Primary General Other (specify) ▼ City State Zip Code TX 78232-3508 Amount of Each Receipt this Primary General Other (specify) ▼ City State Zip Code Transaction ID: 24336445 Amount of Each Receipt this Primary General Date of Receipt Transaction ID: 24336445 Amount of Each Receipt this Primary Date of Cocupation Diagnostic Radiologist Date of Receipt Transaction ID: 24336445 Amount of Each Receipt this Primary Date of Cocupation Date of Receipt Transaction ID: 24336446 Amount of Each Receipt this Primary General Date of Receipt Transaction ID: 24336446 Amount of Each Receipt this Primary General Date of Receipt Date of Receipt Transaction ID: 24336446 Amount of Each Receipt this Primary General Date of Receipt Transaction ID: 24336446 Amount of Each Receipt this Primary General Date of Receipt Transaction ID: 24336446 Amount of Each Receipt this Primary General	Primary General	1000.0	00
Mailing Address 13651 Treasure Trail Dr City State Zip Code TX 78232-3508 FEC ID number of contributing federal political committee. Name of Employer South Texas Râdiology Group, P.A. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Steven Wegert Mailing Address 307 Branch Oak Way City State Zip Code TX 78230-5607 FC ID number of contributing federal political committee. C Date of Receipt Date of Receipt Transaction ID: 24336445 Amount of Each Receipt this Primary Date of Receipt Date of Receipt Transaction ID: 24336446 Amount of Each Receipt this Primary Date of Contributing federal political committee. Name of Employer South Texas Râdiology Group Diagnostic Radiologist Name of Employer South Texas Râdiology Group Diagnostic Radiologist Receipt For: Aggregate Year-to-Date ▼	,	L	Date of Receipt
City State Zip Code TX 78232-3508 FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Group, P.A. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Steven Wegert Mailing Address 307 Branch Oak Way City State Zip Code TX 78230-5607 FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Group Diagnostic Radiologist Aggregate Year-to-Date ▼ Date of Receipt Mailing Address 307 Branch Oak Way City State Zip Code TX 78230-5607 FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Group Diagnostic Radiologist Name of Employer South Texas Radiology Group Diagnostic Radiologist Receipt For: Primary General)r	M M / D D / Y Y Y Y
San Antonio TX 78232-3508 Amount of Each Receipt this Principle. C	City	State Zip Code	
Name of Employer South Texas Radiology Group. P.A. Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Date of Receipt Mailing Address 307 Branch Oak Way City State Zip Code San Antonio TX 78230-5607 FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Group Receipt For: Primary General Aggregate Year-to-Date ▼ Date of Receipt M	San Antonio	TX 78232-3508	Amount of Each Receipt this Period
South Texas Radiology Gro- up, P.A. Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Steven Wegert Mailing Address 307 Branch Oak Way City State Zip Code San Antonio TX 78230-5607 FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Gro- up Receipt For: Primary General Date of Receipt May 1 1 5 2 Transaction ID: 24336446 Amount of Each Receipt this Primary Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 1000.00		C	1000.00
Receipt For: Primary	South Texas Radiology Gro-	·	
Date of Receipt Mailing Address 307 Branch Oak Way City State Zip Code San Antonio TX 78230-5607 FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Group Receipt For: Primary General Date of Receipt M	Receipt For: Primary General		00
Mailing Address 307 Branch Oak Way City State Zip Code San Antonio TX 78230-5607 FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Group Diagnostic Radiologist Receipt For: Primary General State Zip Code Transaction ID: 24336446 Amount of Each Receipt this Poly 10 10 10 10 10 10 10 10 10 10 10 10 10	,	<u> </u>	Date of Receipt
San Antonio TX 78230-5607 Amount of Each Receipt this Potential Section 10 Name of Employer South Texas Radiology Group Diagnostic Radiologist Receipt For: Primary General Amount of Each Receipt this Potential Section 10 Amount of Each Receipt this Potential Section 10 Agreed this Potential Section 10 Agreed to Page 10 Agreed to Potential Section 10 Agreed to Potential Section 10 Amount of Each Receipt this Potential Section 10 Amount of Each Receipt this Potential Section 10 100 100 100 100 100 100 100	Mailing Address 307 Branch Oak Way		
FEC ID number of contributing federal political committee. Name of Employer South Texas Radiology Group Diagnostic Radiologist Receipt For: Primary General C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	•	State Zip Code	Transaction ID: 24336446
Name of Employer South Texas Radiology Gro- up Receipt For: Primary General Occupation Diagnostic Radiologist Aggregate Year-to-Date 1000.00	San Antonio	TX 78230-5607	Amount of Each Receipt this Period
Receipt For: Primary General Aggregate Year-to-Date 1000.00		C	1000.00
Receipt For: Primary General Aggregate Year-to-Date ▼	Name of Employer South Texas Radiology Gro-	· ·	
1000 00	Receipt For:	Aggregate Year-to-Date ▼	
	_	1000.0	00
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional)		3000.00

В.

C.

			<u> </u>
SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 12/90
ITEMIZED RECEIPTS		for each category of the	(check only one)
		Detailed Summary Page	X 11a 11b 11c 12
		/	13 14 15 16 17
Any information copied from such Reports and Si or for commercial purposes, other than using the	tatements may name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American College of Radiology Associ	ation		
Full Name (Last, First, Middle Initial) Dr. Barry Menick			Date of Receipt
Mailing Address 333 Elizabeth Rd			0 4
City	State	Zip Code	Transaction ID: 24336447
San Antonio	TX	78209-5960	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		2000.00
Name of Employer South Texas Radiology Gro- up, P.A.	Occupation Diagnost	n ic Radiologist	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General	33 -3		1
Other (specify) ▼		2000.00	
Full Name (Last, First, Middle Initial)			
Dr. Richard Benedikt			Date of Receipt
Mailing Address 501 Patterson Ave			04 / 15 / Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 24336448
San Antonio	TX	78209-5632	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer South Texas Radiology Gro- up. P.A.	Occupation Diagnost	n ic Radiologist	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General	' '	1000.00	1
☐ Other (specify) ▼	0 0	1000.00	
Full Name (Last, First, Middle Initial) Dr. William Baber			Date of Receipt
Mailing Address 7 Cricklewood PI			04 / 15 / Y Y Y Y Y
City	State	Zip Code	Transaction ID: 24336451
Saint Louis	MO	63131-3311	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.			500.00
Name of Employer Midwest Radiological Asso-	Occupation		7
ciates, P.C.	,	ic Radiologist	_
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	
☐ Ottlet (specify) ▼		1 1 1 1 1 1 1	1
SUBTOTAL of Receipts This Page (optional)	I		3500.00

TOTAL This Period (last page this line number only)

 \triangleright

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 90 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Jamie Colonnello Mailing Address 6343 Alexander Dr			Date of Receipt
City Saint Louis	State MO	Zip Code 63105-2222	Transaction ID: 24336452 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		375.00
Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼		n cic Radiologist e Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) Dr. Douglas Curry Mailing Address 9815 Log Cabin Ct	I		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 24336453
Saint Louis	MO	63124-1133	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Midwest Radiological Asso- ciates, P.C. Receipt For:		n cic Radiologist e Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate	500.00	
Full Name (Last, First, Middle Initial) Dr. Gene Davis, JR			Date of Receipt
Mailing Address 25 Chesterfield Lak	es Rd		0 4 1 5 2 0 0 8
City	State	Zip Code	Transaction ID: 24336454
Chesterfield	MO	63005-4513	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		400.00
Name of Employer Midwest Radiological Asso- ciates Receipt For:		n ic Radiologist e Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate	400.00	
SUBTOTAL of Receipts This Page (optional	. (l		1275.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS Any information copied from such Reports and	for each category of the Detailed Summary Page d Statements may not be sold or used by any person	FOR LINE NUMBER: PAGE 14 / 90 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Asset	the name and address of any political committee to ciation	to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. David Diemer Mailing Address 2618 Wickerton Ct		Date of Receipt 0 4 1 5 2 0 0 8
City	State Zip Code	Transaction ID: 24336455
Saint Louis	MO 63122-3351	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Midwest Radiological Asso- ciates, P.C. Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 500.00	
Full Name (Last, First, Middle Initial) Dr. John Engels		Date of Receipt
Mailing Address 40 Midpark Ln		0 4
City	State Zip Code	Transaction ID: 24336456
Saint Louis	MO 63124-1557	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Midwest Radiological Asso- ciates, P.C.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Dale Fletcher		Date of Receipt
Mailing Address 239 Whiting Lane		0 4 1 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Chesterfield	State Zip Code MO 63005-6919	Transaction ID: 24336457 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Midwest Radiological Asso- ciates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)	2500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 90 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. Geoffrey Hamill Mailing Address 425 W Jackson Rd			Date of Receipt
City Webster Groves FEC ID number of contributing	State MO	Zip Code 63119-3643	Transaction ID: 24336458 Amount of Each Receipt this Period
Name of Employer Midwest Radiological Associate Receipt For: Primary General		n ic Radiologist e Year-to-Date ▼	500.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Sean Higginson Mailing Address 5554 Waterman Blv City	vd Apt 3E	Zip Code	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Saint Louis FEC ID number of contributing federal political committee. Name of Employer Midwest Radiology Associa-	MO C Occupation	63112-1836	Amount of Each Receipt this Period 500.00
tes Receipt For: Primary General Other (specify)		ic Radiologist Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Walter Holloman Mailing Address 65 Meadowbrook C	ountry Club Es	t	Date of Receipt 0 4 1 5 2 0 0 8
City Ballwin FEC ID number of contributing federal political committee.	State MO	Zip Code 63011-1697	Transaction ID: 24336460 Amount of Each Receipt this Period 300.00
Name of Employer Midwest Radiological Associates Receipt For: Primary General Other (specify) ▼		n ic Radiologist e Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional	l)		1300.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedul for each category of the Detailed Summary Pa	ne (criccit drilly drie)
0	ny information copied from such Reports and sort for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by a chame and address of any political commendations.	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
	American College of Radiology Associ	iation	
۸.	Full Name (Last, First, Middle Initial) Dr. Amy Mosher Mailing Address 5136 Westminster PL		Date of Receipt
			04 15 2008
	City Saint Louis	State Zip Code MO 63108-1121	Transaction ID: 24336461 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Midwest Radiological Asso- ciates, P.C.	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500	.00
 3.	Full Name (Last, First, Middle Initial) Dr. John Niemeyer Mailing Address 1652 Mason Knoll Rd		Date of Receipt
			04 15 2008
	City Saint Louis	State Zip Code MO 63131-1219	Transaction ID: 24336462 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Midwest Radiological Asso- ciates	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	.00
_	Full Name (Last, First, Middle Initial) Dr. Lisa Oakley		Date of Receipt
	Mailing Address 8101 Stratford Dr		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State Zip Code	Transaction ID: 24336463
	Saint Louis FEC ID number of contributing federal political committee.	MO 63105-3707	Amount of Each Receipt this Period 300.00
	Name of Employer Midwest Radiological Asso- ciates	Occupation Diagnostic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	.00
Γ.	SUBTOTAL of Receipts This Page (optional) .	1	1800.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 90 (check only one) X 11a 11b 11c 12 13 14 15 16 17
A 0	ny information copied from such Reports and s r for commercial purposes, other than using th NAME OF COMMITTEE (In Full)	e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
	American College of Radiology Assoc	ciation		
٧.	Full Name (Last, First, Middle Initial) Dr. Linda Proctor			Date of Receipt
	Mailing Address 346 N Meramec Ave			04 15 7 2008
	Clautan	State	Zip Code	Transaction ID: 24336464
	Clayton FEC ID number of contributing federal political committee.	C	63105-3719	Amount of Each Receipt this Period 500.00
	Name of Employer Midwest Radiological Associates Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	,	n tic Radiologist e Year-to-Date ▼ 500.00	
_ 3.	Full Name (Last, First, Middle Initial) Dr. Floyd Scales Mailing Address 12580 Durbin Dr			Date of Receipt
	City	State	Zip Code	0 4 1 5 2 0 0 8 Transaction ID: 24336465
	Saint Louis	MO	63141-8814	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Midwest Radiologists Asso- ciates	Occupatio Diagnost	n tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Dr. Robert Scheible			Date of Receipt
	Mailing Address 759 N Hanley Rd			0 4 1 5 2 0 0 8
	City	State	Zip Code	Transaction ID: 24336466
	Saint Louis	MO	63130-2827	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Midwest Radiological Asso-	Occupatio		
	<u>ciates</u> Receipt For:	, ' 	tic Radiologist e Year-to-Date	\dashv
	Primary General Other (specify) ▼	Aggregate	250.00	
	SUBTOTAL of Receipts This Page (optional) .			1250.00

			_
SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 18 / 90 (check only one)
ITEMIZED RECEIPTS		for each category of the	
II LIVIIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
		, ,	13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American College of Radiology Associ	iation		
Full Name (Last, First, Middle Initial) Dr. Steven Solomon			Date of Receipt
Mailing Address 17609 Ailanthus Drive			M M / D D / Y Y Y Y Y O S O S O S O S O S O S O S O
City	State	Zip Code	Transaction ID: 24336467
Chesterfield	MO	63005-4284	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Midwest Radiological Asso-	Occupation	on tic Radiologist	
ciates, P.C. Receipt For:	, '	e Year-to-Date	
Primary General	1.99.094.		1
Other (specify) ▼	0 0	500.00	
Full Name (Last, First, Middle Initial) Dr. Christopher Thornton	•		Date of Receipt
Mailing Address 308 Townsend St			0 4 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 24336468
Saint Louis	MO	63141-8334	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Midwest Radiological Asso- ciates, P.C.	Occupation	on tic Radiologist	
Receipt For:	, ' <u> </u>	e Year-to-Date ▼	
Primary General	7 iggi ogai.		1
Other (specify) ▼	0 0	500.00	
Full Name (Last, First, Middle Initial) Dr. John Booker, JR	1		Date of Receipt
Mailing Address PO Box 308			04 15 2008
City	State	Zip Code	Transaction ID: 24336469
<u>Hickory</u>	NC	28603-0308	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		150.00
Name of Employer Catawba Radiological Asso- ciates	Occupation Diagnos	on tic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 300.00	
			4

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS Any information copied from such Reports an	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 90 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and address of any political committee to sociation	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Steven Harlan Mailing Address PO Box 308		Date of Receipt
City	State Zip Code	0 4 1 5 2 0 0 8 Transaction ID: 24336470
Hickory	NC 28603-0308	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Catawba Radiological Associates, Inc. Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 300.00	
Full Name (Last, First, Middle Initial) Dr. Nicholas Frankel		Date of Receipt
Mailing Address PO Box 9470		0 4 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 24336472
Hickory	NC 28603-9470	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Catawba Radiological Asso- ciates, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. John Bools		Date of Receipt
Mailing Address Catawba Radiologic 18 13th Ave NE	cal Assoc	0 4 1 5 2 0 0 8
City <u>Hickory</u>	State Zip Code NC 28601-3748	Transaction ID: 24336473 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Catawba Radiological Asso- ciates, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optiona	I)	450.00

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 90 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may be name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American College of Radiology Asso	ciation		
Full Name (Last, First, Middle Initial) Dr. Charles Scheil			Date of Receipt
Mailing Address 281 44th Avenue Cir	NW		04 / 15 / 2008
City	State	Zip Code	Transaction ID: 24336474
Hickory	NC	28601-9016	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		150.00
Name of Employer Catawba Radiological Asso- ciates, Inc.	Occupatio Diagnost	n tic Radiologist	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	300.00]
Full Name (Last, First, Middle Initial) Dr. Alan Massengill			Date of Receipt
Mailing Address Catawba Radiologica PO Box 308	l Assoc		04 15 7 9 9 9
City	State	Zip Code	Transaction ID: 24336475
Hickory	NC	28603-0308	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		150.00
Name of Employer Catawba Radiological Asso- ciates	Occupatio Diagnost	n tic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Michael Jacobs			Date of Receipt
Mailing Address 3818 11th Street PI N	IE		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 24336476
Hickory	NC	28601-8420	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		150.00
Name of Employer Catawba Radiological Asso- ciates, Inc.	Occupatio Diagnost	n tic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional)			450.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 90 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology As	nd Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Michael Seshul, SR		Date of Receipt
Mailing Address 1009 13th Avenue	PI NW	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 24336477
Hickory	NC 28601-2300	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Catawba Radiological Asso- ciates, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Eric Rautiola	L	Date of Receipt
Mailing Address PO Box 308		M M / D D / Y Y Y Y Y O N N N N N N N N N N N N N N
City	State Zip Code	Transaction ID: 24336478
Hickory	NC 28603-0308	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Catawba Radiological Asso- ciates, Inc.	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Keith Harper	I	Date of Receipt
Mailing Address 602 46th Ave Dr N	Е	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 24336479
Hickory	NC 28601-7318	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Catawba Radiological Asso- ciates	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (option	al)	450.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 90 (check only one) X 11a
Ar	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma e name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American College of Radiology Assoc	iation		
۸.	Full Name (Last, First, Middle Initial) Dr. Richard Curtis Mailing Address 147 Winwood Cir			Date of Receipt
				04 15 2008
	City Granite Falls	State NC	Zip Code 28630-9558	Transaction ID: 24336480 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer Catawba Radiological Asso- c.	Occupation Diagnos	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
 3.	Full Name (Last, First, Middle Initial) Dr. Thomas Cunningham, III Mailing Address 419 S Washington St	1		Date of Receipt
	City	State	Zip Code	04 15 2008
	Casper	WY	82601-2951	Transaction ID: 24336481 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		720.00
	Name of Employer Casper Medical Imaging	, i — · —	tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 720.00	
_	Full Name (Last, First, Middle Initial) Dr. Boris A. Karaman			Date of Receipt
	Mailing Address 7190 St Ursula Dr			0 4 1 5 2 0 0 8
	City	State	Zip Code	Transaction ID: 24336483
	Canfield FEC ID number of contributing federal political committee.	ОН	44406-8059	Amount of Each Receipt this Period 360.00
	Name of Employer Casper Medical Imaging	Occupation Diagnos	on tic Radiologist	
	Receipt For: Primary General Other (specify) ▼	, ' 	e Year-to-Date ▼ 360.00	
		I		1230.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 90 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Associ	ation		
Full Name (Last, First, Middle Initial) Dr. Paul Peters			Date of Receipt
Mailing Address 3850 E 14 Apt U			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City	State	Zip Code	Transaction ID: 24336484
Casper	WY	82609-3100	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		450.00
Name of Employer Casper Medical Imaging,	Occupatio		
P.C. Receipt For:		ic Radiologist	_
Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial) Dr. Geoffrey Smith	1		Date of Receipt
Mailing Address Casper Medical Imagir 419 S Washington St S			0 4 1 5 2 0 0 8
City	State	Zip Code	Transaction ID: 24336485
Casper	WY	82601-2951	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1800.00
Name of Employer Casper Medical Imaging	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1800.00	
Full Name (Last, First, Middle Initial) Dr. Daniel Sulser			Date of Receipt
Mailing Address 5280 Squaw Creek Rd			0 4 1 5 2 0 0 8
City	State	Zip Code	Transaction ID: 24336486
Casper	WY	82604-4257	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		720.00
Name of Employer Casper Medical Imaging, P.C.	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 720.00	
SUBTOTAL of Receipts This Page (optional)			2970.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate for each cates Detailed Sum	ory of the	FOR LINE NUMBER: PAGE 24 / 90 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and address of any politi	sed by any perso cal committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Aaron Wright Mailing Address 4825 Mountain Wa			Date of Receipt
City Casper	State Zip Code WY 82601-6920)	Transaction ID: 24336487 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		640.00
Name of Employer Self-Employed Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date	640.00	
Full Name (Last, First, Middle Initial) Dr. Andrew Osiason Mailing Address 506 Julie Ct			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code		Transaction ID: 24336488
Wyckoff	NJ 07481-1101		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		38.46
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼	307.68	
Full Name (Last, First, Middle Initial) Dr. David Panush			Date of Receipt
Mailing Address 538 E 84th St Apt 4	E		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code		Transaction ID: 24336489
New York	NY 10028-7357	,	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		38.46
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist		
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	307.68	
SUBTOTAL of Receipts This Page (optiona	1		716.92

SCHEDULE A (FEC	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 90 (check only one) X 11a
Any information copied from su or for commercial purposes, ot NAME OF COMMITTEE (II American College of Ra	her than using the name and ac n Full)	ay not be sold or used by any pers Idress of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Midd Dr. Joel Rakow			Date of Receipt
Mailing Address 505 lvy	Lane		04 15 2008
City	State	Zip Code	Transaction ID: 24336490
Wyckoff	NJ	07481-1072	Amount of Each Receipt this Period
FEC ID number of contributed federal political committee.	ting		38.46
Name of Employer Hackensack Radiology Gro	Occupation Diagnos	on tic Radiologist	
Receipt For: Primary Ger Other (specify) ▼	Aggregat Aggregat	e Year-to-Date ▼ 307.68	
Full Name (Last, First, Midd Dr. Patrick Toth	dle Initial)		Date of Receipt
Mailing Address 201 E 8	80th St Apt 8F		04 15 2008
City	State	Zip Code	Transaction ID: 24336491
New York	NY	10021-0515	Amount of Each Receipt this Period
FEC ID number of contributed federal political committee.	ting		38.46
Name of Employer Hackensack Radiology Gro	Occupation Diagnos	on tic Radiologist	
Receipt For: Primary Ger Other (specify) ▼	neral Aggregat	e Year-to-Date ▼ 307.68	
Full Name (Last, First, Midd Dr. Rita S. Patel	dle Initial)		Date of Receipt
Mailing Address 3 Ware	Rd		04 15 2008
City	State	Zip Code	Transaction ID: 24336492
Upper Saddle River	NJ	07458-1919	Amount of Each Receipt this Period
FEC ID number of contributed federal political committee.	ting		38.46
Name of Employer Hackensack Radiology Gro	Occupation Diagnos	on tic Radiologist	
Receipt For: Primary Ger Other (specify) ▼	Aggregat	e Year-to-Date ▼ 307.68	
SUBTOTAL of Receipts This	Page (optional)		115.38

SCHEDULE A (FEC Form SITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 90 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology A	and Statements may not be sold or used by any persoing the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	SSOCIATION	
Dr. Mitchell Miller Mailing Address 2 Constitution Ct	Apt 1009	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 24336494
<u>Hoboken</u>	NJ 07030-6730	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68	
Full Name (Last, First, Middle Initial) Dr. Sean D. Pierce		Date of Receipt
Mailing Address 47-30 Vernon Blv	rd Unit 1R	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 24336495
Long Island City	NY 11101-5546	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68	
Full Name (Last, First, Middle Initial) Dr. George Joseph Ferrone		Date of Receipt
Mailing Address 440 E 62nd St Ap	ot 18F	0 4 1 5 2 0 0 8
City	State Zip Code	Transaction ID: 24336496
New York	NY 10065-8345	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68	
SUBTOTAL of Receipts This Page (optic	onal)	115.38

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology As	and Statements may not be sold or used by any person g the name and address of any political committee to sessociation	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Hiten Magan Malde Mailing Address 7 Kinkaid Ave		Date of Receipt
		04 15 2008
City	State Zip Code	Transaction ID: 24336497
Closter FEC ID number of contributing federal political committee.	NJ 07624-2908	Amount of Each Receipt this Period 38.46
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68	
Full Name (Last, First, Middle Initial) Dr. Adam Bogomol		Date of Receipt
Mailing Address 50 W 72nd St Apt	1509	0 4 1 5 2 0 0 8
City	State Zip Code	Transaction ID: 24336498
New York	NY 10023-4132	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 307.68	
Full Name (Last, First, Middle Initial) Dr. Harry Agress, JR		Date of Receipt
Mailing Address Hackensack Unive 30 Prospect Ave	rsity Medical Ctr	0 4 1 5 2 0 0 8
City	State Zip Code	Transaction ID: 24336499
Hackensack	NJ 07601-1914	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68	
SUBTOTAL of Receipts This Page (option	al)	115.38

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS Any information copied from such Reports ar	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 90 (check only one) X 11a 11b 11c 12 13 14 15 16 17 on for the purpose of soliciting contributions
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	g the name and address of any political committee to sociation	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Arthur S. Albert Mailing Address 124 W 60th St Apt	45	Date of Receipt
City	State Zip Code	0 4 1 5 2 0 0 8 Transaction ID: 24336500
New York	NY 10023-7451	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68	
Full Name (Last, First, Middle Initial) Dr. Joel Budin		Date of Receipt
Mailing Address 140 Chestnut St		04 15 2008
City Englewood	State Zip Code NJ 07631-3033	Transaction ID: 24336501
FEC ID number of contributing federal political committee.	NJ 07631-3033	Amount of Each Receipt this Period 38.46
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68	
Full Name (Last, First, Middle Initial) Dr. Robert Krugman		Date of Receipt
Mailing Address 10 Lexington Ct		0 4 1 5 2 0 0 8
City Englewood	State Zip Code NJ 07631-3081	Transaction ID: 24336502 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68	
SUBTOTAL of Receipts This Page (options	(light)	115.38

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 90 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	d Statements may not be sold or used by any person the name and address of any political committee to ociation	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. John DeMeritt Mailing Address 18 Baldwin Rd City Saddle River FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify)	State Zip Code NJ 07458-3203 C Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 307.68	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Alan D. Chan Mailing Address 18875 164th AVE N City Woodinville FEC ID number of contributing federal political committee. Name of Employer Radia, Inc. Receipt For: Primary General	State Zip Code WA 98072-6405 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 1160.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Joseph DeMartini Mailing Address PO Box 85398 City Seattle FEC ID number of contributing federal political committee. Name of Employer Radia, Inc. Receipt For: Primary Other (specify)	State Zip Code WA 98145-1398 C Occupation Diagnostic Radiologist Aggregate Year-to-Date 650.00	Date of Receipt M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	698.46

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 90 (check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associations and S or for commercial purposes, other than using the S or for commercial purposes.	e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Virginia Eschbach Mailing Address 2410 141St PI SE City Mill Creek FEC ID number of contributing federal political committee. Name of Employer Radia, Inc. Receipt For: Primary General	State Zip Code WA 98012-1336 C Occupation Diagnostic Radiologist Aggregate Year-to-Date	Date of Receipt M M
Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Mark Mayhle Mailing Address 907 14th Ave E City Seattle FEC ID number of contributing federal political committee. Name of Employer Radia Medical Imaging Receipt For:	State Zip Code WA 98112-3903 C Occupation Diagnostic Radiologist Aggregate Year-to-Date	Date of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Scott Vanderheiden Mailing Address 4705 220th St SW City Mountlake Terrace FEC ID number of contributing federal political committee. Name of Employer Radia. Inc.	State Zip Code WA 98043-4052 C	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify) SUBTOTAL of Receipts This Page (optional)	Diagnostic Radiologist Aggregate Year-to-Date ▼ 650.00	940.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	(A)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 90 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and	d Statements may	not be sold or used by any pers	on for the purpose of soliciting contributions
or for commercial purposes, other than using	the name and add	ress of any political committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	ociation		
Full Name (Last, First, Middle Initial) Dr. Pedro Vieco			Date of Receipt
Mailing Address 13911 185th Ct NE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 24336522
Woodinville	WA	98072-6588	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1500.00
Name of Employer Radia, Inc.	Occupation	c Radiologist	
Receipt For:		Year-to-Date ▼	
Primary General	, iggi egale		7
Other (specify) ▼	0 0	2500.00	
Full Name (Last, First, Middle Initial) Dr. Robert Hawkins	<u>'</u>		Date of Receipt
Mailing Address 7856 Scatchet Head	d Rd		04 15 2008
City	State	Zip Code	Transaction ID: 24336523
Clinton	WA	98236-9768	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Radia, Inc.	Occupation Diagnosti	c Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Jeffrey Jaindl	I		Date of Receipt
Mailing Address 939 Quarter Round	Road		0 4 1 7 2 0 0 8
City	State	Zip Code	Transaction ID: 24375878
Pacolet	SC	29372-3516	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Greenville Radiology, P.A.	Occupation Diagnosti	c Radiologist	
Receipt For:		Year-to-Date ▼	
Primary General Other (specify) ▼		400.00	
			1900.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 32 / 90 (check only one)
II LIVIIZED NEGEIP I 3		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the \ensuremath{S}	Statements may e name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Assoc	iation		
Full Name (Last, First, Middle Initial) Dr. Terry Martin			Date of Receipt
Mailing Address Rad Assoc of Biirming 2090 Columbiana Rd	ham PC Ste 4400		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 24375882
Birmingham	AL	35216-2152	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Rad Assoc of Biirmingham	Occupation	n ic Radiologist	
PC Receipt For:	, ' 	Year-to-Date V	\dashv
Primary General	, iggi egale		7
Other (specify) ▼		400.00	
Full Name (Last, First, Middle Initial) Dr. Demetrius Morros	•		Date of Receipt
Mailing Address 7418 Ridgecrest Court	t Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 24375891
Birmingham	AL	35242-0525	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		83.34
Name of Employer Birmingham Radiological Group P.C.	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
Other (specify)		333.36	
Full Name (Last, First, Middle Initial) Dr. Janet Storella	1		Date of Receipt
Mailing Address 6515 Fallwind Ln			04 17 2008
City	State	Zip Code	Transaction ID: 24375940
Bethesda	MD	20817-4941	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer Drs Grover, Christie & Me- rritt	Occupation	n ic Radiologist	
Receipt For:	1 '	Year-to-Date ▼	
Primary General Other (specify) ▼	, iggi ogulo	320.00]
SUBTOTAL of Receipts This Page (optional)		_	223.34

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) American College of Radiology Association Full Name (Last, First, Middle Initial) Dr. Albert Zilkha Mailing Address 1 White Gate Dr City State Zip Code NY 11545-2745 FEC ID number of contributing federal political committee. Name of Employer Occupation Diagnostic Radiologist Receipt For: Primary Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Diane kenogle-Leuschen Mailing Address 105 Palo Alto City State Zip Code TX 78006-5999 FEC ID number of contributing federal political committee. City State Zip Code TX 78006-5999 FEC ID number of contributing federal political committee. City State Zip Code TX 78006-5999 FEC ID number of contributing federal political committee. City Amount of Each Receipt this Period FEC ID number of contributing federal political committee. City State Zip Code TX 78006-5999 FEC ID number of contributing federal political committee. City Amount of Each Receipt this Period FEC ID number of contributing federal political committee. City Aggregate Year-to-Date ▼ Firmary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Diagnostic Radiologist City Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial) Dr. Diagnostic Radiologist City Aggregate Year-to-Date ▼ Full Name (Last, First, Middle Initial)				_	
Tremized Receipts Second State Circle Contyring Circle Contyri	(SCHEDULE A (FEC Form 3X)		Llea conorata echadula(e)	
Any information opied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. Any information opied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for for commercial purposes, other than using the mane and address of any political committee to solicit contributions from such committee. Any information opied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for the purpose of soliciting c		•			
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for corrometrical purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Fuil) Anerican College of Radiology Association Full Name (Last, First, Middle Initial) Dr. Alburt Zilbita Mailing Address 1 White Gate Dr City Glen Head NY 11545-2745 FEC ID number of contributing federal political committee. Receipt Fo: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Dr. Cabine Receipt Middle Initial) Dr. Dr. Cabine Receipt For: Primary General Other (specify) ▼ FEC ID number of contributing federal political committee. City State Zip Code Ty 78006-5999 FEC ID number of contributing federal political committee. City State Zip Code Ty 78006-5999 FEC ID number of contributing federal political committee. City FEC ID number of contributing federal political committee. City Firmary General Other (specify) ▼ FUI Name (Last, First, Middle Initial) Dr. Cabine Receipt For: Primary General Other (specify) ▼ Aggregate Vest-to-Date ▼ FEC ID number of contributing federal political committee. City Full Name (Last, First, Middle Initial) Dr. Cabine Leachene Mailing Address 105 Palo Alto City State Zip Code Ty 78006-5999 FEC ID number of contributing federal political committee. City State Zip Code Ty 78006-5999 Ty 78006-5999 Ty 78006-5999 FEC ID number of contributing federal political committee. City State Zip Code Ty 78006-5999 Transaction ID: 24375975 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Occupation Diagnostic Radiologist Aggregate Vest-to-Date ▼ Primary General Other (specify) ▼ Aggregate Vest-to-Date ▼ Aggregate Vest-to-Date ▼ Primary General Other (specify) ▼ Aggregate Vest-to-Date ▼ Aggregate Vest-to-Date ▼ Aggregate Vest-to-Date	•	I EIVIIZED RECEIP I S		o ,	
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American College of Radiology Association Full Name (Last, First, Middle Initial) Date of Receipt Milling Address 1 White Gate Dr City Glen Head NY 11545-2745 FEC ID number of contributing lederal political committee. Name of Employer Seferangional political committee. Name of Employer Seferangional political committee. Receipt For: Primary General Orber (specify) ▼ B. Full Name (Last, First, Middle Initial) Dr. Diane loanogle-Leuschen Mailing Address 105 Palo Alto City State Zip Code TX 78006-5999 FEC ID number of contributing lederal political committee. Cant. Receipt For: Primary General Other (specify) ▼ Date of Receipt Tansaction ID: 24375958 Amount of Each Receipt this Period Transaction ID: 24375968 Amount of Each Receipt this Period Transaction ID: 24375968 Amount of Each Receipt this Period Transaction ID: 24375968 Transaction ID: 24375968 Amount of Each Receipt this Period Transaction ID: 24375968 Transaction ID: 24375975 Amount of Each Receipt this Period Edit In Transaction ID: 24375975 Transaction ID: 24375975 Amount of Each Receipt this Period Edit In Transaction ID: 24375975 Transaction ID: 24375975 Amount of Each Receipt this Period Edit In Transaction ID: 24375975 Transaction ID: 24375975 Amount of Each Receipt this Period Edit In Transaction ID: 24375975 Transaction ID	Г				
A. D. American College of Radiology Association Full Name (Last, First, Middle Initial) D. Albert Ziloha Maling Address 1 White Gate Dr City State Zip Code Glen Head NY 11545-2745 FEC ID number of contributing rederal political committee. Name of Employer Self-employer Self-employer Self-employer Self-employer Occupation Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Date of Receipt Transaction ID: 24375958 Amount of Each Receipt this Period FEU ID number of contributing rederal political committee. Date of Receipt Transaction ID: 24375958 Amount of Each Receipt this Period FEU ID number of contributing rederal political committee. C. C. State Zip Code TX 78006-5999 FEC ID number of contributing rederal political committee. Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ Date of Receipt Transaction ID: 24375962 Transaction ID: 24375968 Amount of Each Receipt this Period FEC ID number of contributing rederal political committee. C. C. Date of Receipt Transaction ID: 24375968 Amount of Each Receipt this Period Transaction ID: 24375968 Transaction ID: 24375968 Transaction ID: 24375968 Amount of Each Receipt this Period Transaction ID: 24375968		Any information copied from such Reports and Stat or for commercial purposes, other than using the na	tements may ame and ado	r not be sold or used by any perso Iress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
A. Pull Name (Last, First, Middle Initial) Date of Receipt V M 17 17 2008 Transaction ID: 24375958 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Pull Name (Last, First, Middle Initial) Date of Receipt Transaction ID: 24375962 Apare at Employer General Other (specity) ▼ Full Name (Last, First, Middle Initial) Date of Receipt Transaction ID: 24375962 Apare at Employer Coccupation Diagnostic Radiologist Receipt For: Primary General Other (specity) ▼ State Zip Code TX 78006-5999 FEC ID number of contributing federal political committee. Name of Employer Coccupation Date of Receipt Transaction ID: 24375962 Amount of Each Receipt this Period Transaction ID: 24375962 Amount of Each Receipt this Period Date of Receipt TX 78006-5999 For Name (Last, First, Middle Initial) Date of Receipt Ty Aggregate Vear-to-Date ▼ Date of Receipt Ty Aggregate Vear-to-Date ▼ Date of Receipt Transaction ID: 24375962 Amount of Each Receipt this Period Date of Receipt Ty Aggregate Vear-to-Date ▼ Date of Receipt Date of Rec		NAME OF COMMITTEE (In Full)			
A. Dr. Albert Zikha Mailing Address 1 White Gate Dr City Glen Head FEC ID number of contributing federal political committee. Name of Employer Primary General Orber (specify) ▼ State Zip Code NY 11545-2745 FEC ID number of contributing federal political committee. Name of Employer Primary General Orber (specify) ▼ Full Name (Last, First, Middle Initial) City Boerne Name of Employer Unive of Xi Health Science Cant Receipt For: Primary General Other (specify) ▼ Cocupation Diagnostic Radiologist Transaction ID: 24375962 Amount of Each Receipt this Period Date of Receipt Touch of Each Receipt this Period Date of Receipt Transaction ID: 24375962 Amount of Each Receipt this Period Date of Receipt Transaction ID: 24375962 Amount of Each Receipt this Period Date of Receipt Transaction ID: 24375962 Amount of Each Receipt this Period Date of Receipt Transaction ID: 24375962 Amount of Each Receipt this Period Date of Receipt Transaction ID: 24375962 Amount of Each Receipt this Period Date of Receipt Transaction ID: 24375962 Amount of Each Receipt this Period Diagnostic Radiologist Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 24375975 Amount of Each Receipt this Period Date of Receipt Transaction ID: 24375975 Amount of Each Receipt this Period Date of Receipt Transaction ID: 24375975 Amount of Each Receipt this Period Date of Receipt Transaction ID: 24375975 Amount of Each Receipt this Period Date of Receipt Transaction ID: 24375975 Amount of Each Receipt this Period Date of Receipt Transaction ID: 24375975 Amount of Each Receipt this Period Date of Receipt Transaction ID: 24375975 Amount of Each Receipt this Period Date of Receipt Transaction ID: 24375975 Amount of Each Receipt this Period Date of Receipt Transaction ID: 24375975 Amount of Each Receipt this Period Date of Receipt Transaction ID: 24375975 Amount of Each Receipt this Period Date of Receipt Transaction ID: 24375975 Amount of Each Receipt this Period Date of Receipt Transaction ID		American College of Radiology Associat	tion		
City State Zip Code NY 11545-2745 FEC ID number of contributing federal political committee. Name of Employer Self-employed Diagnostic Radiologist Receipt For: Perimary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Diane benogle-Leuschen Mailing Address 105 Palo Alto City State Zip Code TX 78006-5999 FUI Name of Employer Univ of TX Health Science Cent Radiologist Receipt For: Perimary General Other (specify) ▼ State Zip Code TX 78006-5999 FEC ID number of contributing federal political committee. Cent Cent Receipt For: Perimary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Calvin Louschen Mailing Address 105 Palo Alto City State Zip Code Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Calvin Louschen Mailing Address 105 Palo Alto City State Zip Code TX 78006-5999 FEC ID number of contributing federal political committee. City State Zip Code TX 78006-5999 FEC ID number of contributing federal political committee. City State Zip Code TX 78006-5999 FEC ID number of contributing federal political committee. City State Zip Code TX 78006-5999 FEC ID number of contributing federal political committee. City State Zip Code TX 78006-5999 FEC ID number of contributing federal political committee. City State Zip Code TX 78006-5999 FEC ID number of contributing federal political committee. City State Zip Code TX 78006-5999 FEC ID number of contributing federal political committee. City State Zip Code TX 78006-5999 FEC ID number of contributing federal political committee. Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Transaction ID: 24375975 Amount of Each Receipt this Period TX 78006-5999 Tansaction ID: 24375975 Amount of Each Receipt this Period TX 78006-5999 Tansaction ID: 24375975 Tansaction ID: 24375975 Amount of Each Receipt this Period TX 78006-5999 TX 78006-	Α.				Date of Receipt
Glen Head Second FEC Di number of contributing federal political committee. C Solution Solution		Mailing Address 1 White Gate Dr			
Glen Head Second FEC Di number of contributing federal political committee. C Solution Solution		City	State	Zip Code	Transaction ID: 24375958
Name of Employer Self-employed Diagnostic Radiologist Receipt For: Primary General Occupation Diagnostic Radiologist		Glen Head	NY	11545-2745	
Self-employed Receipt For: Primary			C		
Receipt For:		Name of Employer Self-employed			
Primary		Receipt For:	_ <u> </u>		-
B. Date of Receipt Mailing Address 105 Palo Alto City State Zip Code TX 78006-5999 FEC ID number of contributing federal political committee. Name of Employer Univ of TX Health Science Cent Receipt For: Primary General Other (specify) ▼ State Zip Code TX 78006-5999 Amount of Each Receipt this Period Full Name (Last, First, Middle Initial) Dr. Calvin Leuschen Mailing Address 105 Palo Alto City State Zip Code Toccupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Other (specify) ▼ Transaction ID: 24375975 Amount of Each Receipt this Period Date of Receipt TX 78006-5999 Date of Receipt M M M D D D D D D D D D D D D D D D D			riggrogato		1
B. Dr. Diane Icenogle-Leuschen Mailing Address 105 Palo Alto City State Zip Code Boerne TX 78006-5999 FEC ID number of contributing federal political committee. Name of Employer Univ of TX Health Science Cent Receipt For: Primary General Other (specify) ▼ State Zip Code Mailing Address 105 Palo Alto Date of Receipt Transaction ID: 24375962 Amount of Each Receipt this Period Full Name (Last, First, Middle Initial) Dr. Calvin Leuschen Mailing Address 105 Palo Alto City State Zip Code TX 78006-5999 FEC ID number of contributing federal political committee. City State Zip Code TX 78006-5999 FEC ID number of contributing federal political committee. C State Zip Code TX 78006-5999 Transaction ID: 24375975 Amount of Each Receipt Amount of Each Receipt Amount of Each Receipt Amount of Each Receipt Transaction ID: 24375975 Amount of Each Receipt this Period EC 250.00		Other (specify) ▼	0 0	500.00	
City Boerne TX 78006-5999 FEC ID number of contributing federal political committee. Name of Employer Univ of TX Heafth Science Cent Receipt For: Primary General Other (specify) ▼ State C City State Zip Code TX 78006-5999 Amount of Each Receipt this Period C Diagnostic Radiologist Aggregate Year-to-Date Aggregate Year-to-Date Transaction ID: 24375962 Amount of Each Receipt this Period Date of Receipt Transaction ID: 24375962 Amount of Each Receipt this Period Date of Receipt Transaction ID: 24375975 Amount of Each Receipt this Period C Cocupation Date of Receipt Transaction ID: 24375975 Amount of Each Receipt this Period C Cocupation Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date	- В.	,			Date of Receipt
Beerne TX 78006-5999 FEC ID number of contributing federal political committee. Name of Employer Univ of TX Helth Science Centributing Primary General Other (specify) ▼ C. Dr. Calvin Leuschen Mailing Address 105 Palo Alto City State Zip Code TX 78006-5999 FEC ID number of contributing federal political committee. Name of Employer UTX Hith Sci Ctr at San Antonio Receipt For: Primary General Other (specify) ▼ Amount of Each Receipt this Period Date of Receipt TX 78006-5999 Date of Receipt Transaction ID: 24375975 Amount of Each Receipt this Period Date of Receipt Transaction ID: 24375975 Amount of Each Receipt this Period Transaction ID: 24375975 Amount of Each Receipt this Period Date of Receipt TY 78006-5999 Transaction ID: 24375975 Amount of Each Receipt this Period Date of Receipt TY 78006-5999 Transaction ID: 24375975 Amount of Each Receipt this Period Each Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Docupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Date of Receipt Ty Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		Mailing Address 105 Palo Alto			
FEC ID number of contributing federal political committee. Name of Employer Univ of TX Health Science Cent Receipt For: Primary General Other (specify) ▼ C. Full Name (Last, First, Middle Initial) Dr. Calvin Leuschen Mailing Address 105 Palo Alto City State Zip Code TX 78006-5999 FEC ID number of contributing federal political committee. C. Name of Employer UTX Hith Sci Citr at San Antonio Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Transaction ID: 24375975 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ 250.00		City	State	Zip Code	Transaction ID: 24375962
Name of Employer Univ of TX Health Science Cent Receipt For: Primary General Other (specify) ▼ C. Full Name (Last, First, Middle Initial) Dr. Calvin Leuschen Mailing Address 105 Palo Alto City State Zip Code TX 78006-5999 FEC ID number of contributing federal political committee. C. Name of Employer UTX Hith Sci Ctr at San Antonio Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ C. Cocupation Diagnostic Radiologist Amount of Each Receipt this Period C. Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼		Boerne	TX	78006-5999	Amount of Each Receipt this Period
Univ of TX Health Science Cent Receipt For: Primary			C		500.00
Receipt For:					
C. Date of Receipt Mailing Address 105 Palo Alto City Boerne FC ID number of contributing federal political committee. Name of Employer U TX Hith Sci Ctr at San Antonio Receipt For: Primary General Other (specify) ▼ State Zip Code TX 78006-5999 C C C C Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) Dr. Calvin Leuschen Mailing Address 105 Palo Alto City Boerne TX 78006-5999 FEC ID number of contributing federal political committee. Name of Employer U TX Hith Sci Ctr at San Antonio Receipt For: Primary General Other (specify) Tate of Receipt M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		Primary General	00 0		
C. Dr. Calvin Leuschen Mailing Address 105 Palo Alto City State Zip Code Boerne TX 78006-5999 FEC ID number of contributing federal political committee. Name of Employer U TX Hith Sci Ctr at San Antonio Receipt For: Primary General Other (specify) ▼ Date of Receipt Transaction ID: 24375975 Amount of Each Receipt this Period 250.00		Other (specify)		500.00	
City Boerne TX 78006-5999 FEC ID number of contributing federal political committee. Name of Employer U TX Hith Sci Ctr at San Antonio Receipt For: Primary Other (specify) ▼	с. С.				Date of Receipt
Boerne TX 78006-5999 Amount of Each Receipt this Period C Solution TX 78006-5999 Amount of Each Receipt this Period 250.00 C Solution TX 78006-5999 Amount of Each Receipt this Period 250.00 C Solution Diagnostic Radiologist Aggregate Year-to-Date ▼ Other (specify) ▼ Aggregate Year-to-Date ▼		Mailing Address 105 Palo Alto			
Boerne TX 78006-5999 FEC ID number of contributing federal political committee. C Name of Employer U TX Hith Sci Ctr at San Antonio Receipt For: Primary General Other (specify) ▼ Amount of Each Receipt this Period 250.00 Amount of Each Receipt this Period 250.00		City	State	Zip Code	Transaction ID: 24375975
Name of Employer U TX Hith Sci Ctr at San Antonio Receipt For: Primary Other (specify) ▼ Occupation Diagnostic Radiologist Aggregate Year-to-Date Aggregate Year-to-Date 250.00		Boerne	TX	78006-5999	Amount of Each Receipt this Period
Antonio Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date 250.00			C		250.00
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00					
SUBTOTAL of Receipts This Page (optional)		Receipt For: Primary General	Aggregate		
•		SUBTOTAL of Receipts This Page (optional)			1250.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 90 (check only one) X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	g the name and add	not be sold or used by any persor ress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Mahrad Paymani Mailing Address 7635 Frog Log Ln			Date of Receipt
			04 17 2008
City Leesburg	State FL	Zip Code 34748-9170	Transaction ID: 24376045
FEC ID number of contributing federal political committee.	C	34740-9170	Amount of Each Receipt this Period 500.00
Name of Employer Radiology Associates of Central FL Receipt For: Primary General Other (specify) ▼		c Radiologist Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Michael Levine Mailing Address Lake Medical Imag	ing		Date of Receipt
801 E Dixie Ave Ste	e 104		04 17 2008
City Leesburg	State FL	Zip Code 34748-7601	Transaction ID: 24376046
FEC ID number of contributing federal political committee.	C	34/40-7001	Amount of Each Receipt this Period 500.00
Name of Employer Radiology Associates of Central Florid Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼		c Radiologist Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. George Edward Kainz			Date of Receipt
Mailing Address 2024 Castelli Blvd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 24376047
Mount Dora	FL	32757-6517	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Self-Employed	Occupation Diagnosti	ı c Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00]
SUBTOTAL of Receipts This Page (optional	al)		1500.00

Any information copied from such Reports and Statements may not be said or used by any person for the purpose of seliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American College of Radiology Association Full name (Last, First, Middle Initial) Dr. Maurican Vosion Malling Address PO Box 78 City Eastlake Weir FL 32/33-0078 FEC 10 number of contributing federal political committee. Name of Employer Lake Nedical finsign Occupation Diagnostic Radiologist Full Name (Last, First, Middle Initial) Dr. Lamerocal Labscher Malling Address 2615 W 4th St City State Zip Code Primary General Other (specify) ▼ State Zip Code Materioo FEC 10 number of contributing Fed to value (Last, First, Middle Initial) Dr. Lamerocal Labscher Malling Address 2615 W 4th St City State Zip Code Materioo Materioo FEC 10 number of contributing Fed and Valley Middle Initial) Dr. Jam Sukowski Malling Address 4115 Pembroke Dr City State Zip Code Primary General Other (specify) ▼ Date of Receipt Transaction Its 24376459 Amount of Each Receipt his Period Fed 10 number of contributing Fed 20 number of contributing Fed 20 number of contributing Fed 30 number of contributing Fed 30 number of contributing Fed 40 number of contributing Fed 50 number of contributing Fed 60 number of contributing Fed 10 number	SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 90 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Full Name (Last, First, Middle Initial) Dr. Maurice Yoskin Mailing Address PO Box 78 City Eastlake Weir FL 32139-0078 FC ID number of contributing federal political committee Primary General Other (specify) Waterloo IA 50701-4050 FC ID number of contributing federal political committee C Date of Receipt Transaction ID: 24376459 Amount of Each Receipt this Period Foll Name (Last, First, Middle Initial) Dr. Lawrence Liebschre Waterloo IA 50701-4050 FEC ID number of contributing federal political committee C Date of Receipt Transaction ID: 24376459 Amount of Each Receipt this Period FC ID number of contributing federal political committee C Date of Receipt Transaction ID: 24376459 Amount of Each Receipt this Period Tother (specify) Total Name (Last, First, Middle Initial) Dr. John Sulkowskii Malling Address 4115 Permbroke Dr City State Zip Code In 1000.00 Diagnostic Radiologist Aggregate Year-to-Date Transaction ID: 24376450 Amount of Each Receipt this Period Tother (specify) Transaction ID: 24376460 Amount of Each Receipt this Period FC ID number of contributing federal political committee C City State Zip Code In 1000.00 Diagnostic Radiologist Transaction ID: 24376460 Amount of Each Receipt this Period FC ID number of contributing federal political committee C City State Zip Code In 47711-7730 Date of Receipt Transaction ID: 24376459 Amount of Each Receipt this Period FC ID number of contributing federal political committee C Cocupation Diagnostic Radiologist Transaction ID: 24376460 Amount of Each Receipt this Period FC ID number of contributing federal political committee C Date of Receipt Transaction ID: 24376459 Amount of Each Receipt this Period Transaction ID: 24376450 Tother (specify) Tother (specify) Tother (specify) T	or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	g the name and address of any political committee to s	tor the purpose of soliciting contributions solicit contributions from such committee.
City State Zip Code Eastlake Weir FL 32/33-0078 FEC ID number of contributing federal political committee. C	Full Name (Last, First, Middle Initial)		Date of Receipt
Eastlake Weir FEC ID number of contributing federal political committee. Name of Employer Lake Medical Imaging Prill Name (Last, First, Middle Initial) Dr. Lawrence Liebscher Mailing Address 2615 W 4th St City Waterloo Name of Employer State Zip Code IN Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ State Zip Code Name of Employer Lake Medical Specialists. PC Receipt For: Primary General Other (specify) ▼ State Zip Code Name of Employer Cedar valley Medical Specialists. PC Receipt For: Primary General Other (specify) ▼ State Zip Code Name of Employer Cedar valley Medical Specialists. PC Receipt For: Primary General Other (specify) ▼ State Zip Code IN 47711-7730 Date of Receipt this Period Transaction ID: 24376459 Amount of Each Receipt this Period Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ State Zip Code IN 47711-7730 Date of Receipt Transaction ID: 24376460 Amount of Each Receipt this Period Diagnostic Radiologist Pate of Receipt Date of Receipt	Mailing Address PO Box 78		0 4 1 7 2 0 0 8
FEC ID number of contributing federal political committee. Name of Employer		<u></u>	
Name of Employer Lake Medicial Imaging Receipt For:		FL 32133-0078	Amount of Each Receipt this Period
Diagnitistic Hadribidgs South S		C	500.00
Primary General Sou	Name of Employer Lake Medical Imaging	•	
Dr. Lawrence Liebscher Mailing Address 2615 W 4th St City State Zip Code Waterloo IA 50701-4050 FEC ID number of contributing federal political committee. Name of Employer Cedar Valley Medical Specialists. PC. Primary General Other (specify) ▼ City State Zip Code Primary General Other (specify) ▼ Cocupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 24376459 Amount of Each Receipt this Period Date of Receipt Transaction ID: 24376459 Amount of Each Receipt this Period Date of Receipt Transaction ID: 24376459 Amount of Each Receipt this Period Date of Receipt Date of Receipt Transaction ID: 24376450 Amount of Each Receipt Date of Receipt Transaction ID: 24376460 Amount of Each Receipt Date of Receipt Date of Receipt Transaction ID: 24376460 Amount of Each Receipt Date of Receipt Transaction ID: 24376460 Amount of Each Receipt Date of Receipt Transaction ID: 24376460 Amount of Each Receipt T	Primary General		
City State Zip Code Waterloo IA 50701-4050 FEC ID number of contributing federal political committee. Name of Employer Cedar Valley Medical Specialists, PC Receipt For: Primary General Other (specify) ▼			Date of Pagaint
City State Zip Code IA 50701-4050 FEC ID number of contributing federal political committee. C			M M / D D / Y Y Y Y
Waterloo IA 50701-4050 Amount of Each Receipt this Period	City	State Zip Code	
Name of Employer Cedar Valley Medical Spec- ialists, PC Receipt For:	<u>Waterloo</u>	IA 50701-4050	
Aggregate Year-to-Date ▼ Date of Receipt		C	1000.00
Receipt For: Primary General 1000.00	Name of Employer Cedar Valley Medical Spec-	•	-
Dr. John Sutkowski Mailing Address 4115 Pembroke Dr City State Zip Code Evansville IN 47711-7730 FEC ID number of contributing federal political committee. Name of Employer WFU School of Medicine Receipt For: Primary General Other (specify) ▼ Date of Receipt N M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Receipt For: Primary General	Aggregate Year-to-Date ▼	
City Evansville FEC ID number of contributing federal political committee. Name of Employer WFU School of Medicine Receipt For: Primary General Other (specify) ▼ Other (specify) ▼ State Zip Code IN 47711-7730 Amount of Each Receipt this Period Foot. Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ State Zip Code Transaction ID: 24376460 Amount of Each Receipt this Period 500.00			Date of Receipt
Evansville IN 47711-7730 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer WFU School of Medicine Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	Mailing Address 4115 Pembroke Di	ſ	
FEC ID number of contributing federal political committee. Name of Employer WFU School of Medicine Receipt For: Primary General Other (specify) Occupation Diagnostic Radiologist Aggregate Year-to-Date 500.00		•	Transaction ID: 24376460
Receipt For: Primary Other (specify) ▼ Occupation Diagnostic Radiologist Aggregate Year-to-Date 500.00	<u>Evansville</u>	IN 47711-7730	Amount of Each Receipt this Period
WFU School of Medicine Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ Diagnostic Radiologist Aggregate Year-to-Date ▼ 500.00		C	500.00
Receipt For: Primary Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	Name of Employer WFU School of Medicine	·	1
SUBTOTAL of Receipts This Page (optional)	Primary General		
	SUBTOTAL of Receints This Page (ontion	al)	2000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 90 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	Uy not be sold or used by any personderss of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Assoc	iation		
Full Name (Last, First, Middle Initial) Dr. Ryan Meyer			Date of Receipt
Mailing Address 2100 Long Cove Cir			04 17 2008
City	State	Zip Code	Transaction ID: 24376461
Newburgh	IN	47630-8412	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Univ of Tennessee Health	Occupatio	n	\neg
Univ of Tennessee Health Science	Diagnost	ic Radiologist	
Receipt For:	Aggregate	e Year-to-Date	
Primary General Other (specify) ▼	0 0	500.00	
Full Name (Last, First, Middle Initial) Dr. Reynaldo N. Gonzales			Date of Receipt
Mailing Address 611 Harriet St. Suite 201			04 17 2008
City	State	Zip Code	Transaction ID: 24376462
<u>Evansville</u>	IN	47710-1781	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Evansville Radiology, P.C.	Occupatio Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Curtis C. Stautz			Date of Receipt
Mailing Address 6411 Belle Rive Drive			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 24376463
Newburgh	IN	47630-1590	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Evansville Radiology, P.C.	Occupatio Diagnost	n ic Radiologist	
Receipt For:	Aggregate	e Year-to-Date	
Primary General Other (specify) ▼		500.00	
SUBTOTAL of Receipts This Page (optional)			1500.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	for each	eparate schedule(s) ch category of the ed Summary Page	FOR LINE NUMBER: PAGE 37 / 90 (check only one) X
A	ny information copied from such Reports and for commercial purposes, other than using the	Statements may not be see name and address of a	old or used by any perso ny political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Asso	ciation		
	Full Name (Last, First, Middle Initial) Dr. David Sullivan			Date of Receipt
	Mailing Address 1421 Stonebriar Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City		Code	Transaction ID: 24376466
	Evansville	IN 477	25-1192	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer Evansville Radiology, P.C.	Occupation Diagnostic Radio	ologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-I	Date ▼ 500.00	
_	Full Name (Last, First, Middle Initial) Dr. Daniel Whitehead			Date of Receipt
	Mailing Address Evansville Radiology 611 Harriet St Ste 103			04 17 2008
	City	•	Code	Transaction ID: 24376467
	<u>Evansville</u>	<u>IN 477</u>	10-1781	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Evansville Radiology, P.C.	Occupation Diagnostic Radio	ologist	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-I	Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Dr. P C. Shekar			Date of Receipt
	Mailing Address 1032 Cypress Pointe	Dr		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	•	Code	Transaction ID: 24376468
	Caseyville	IL 622	32-2830	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Self-Employed	Occupation Diagnostic Radio	ologist	
	Receipt For:	Aggregate Year-to-I	Date ▼	
	Primary General Other (specify) ▼	0 0 0	500.00	
				1500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	• /	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38/90 (check only one)			
Any information copied from such Reports and or for commercial purposes, other than using the commercial purposes.	d Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions			
NAME OF COMMITTEE (In Full)	r for commercial purposes, other than using the name and address of any political committee to so					
American College of Radiology Asso	ociation					
Full Name (Last, First, Middle Initial) Dr. Larry Grissom			Date of Receipt			
Mailing Address Houston NW Radiol 800 Peakwood Dr Si	ogy Associatio te 5E		04 17 2008			
City	State	Zip Code	Transaction ID: 24376470			
<u>Houston</u>	TX	77090-2903	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		250.00			
Name of Employer Houston NW Radiology Asso- ciates	Occupation Diagnost	n ic Radiologist				
Receipt For: Primary General	Aggregate	e Year-to-Date ▼				
Other (specify)	0 0	250.00				
Full Name (Last, First, Middle Initial) Dr. Robert Brown			Date of Receipt			
Mailing Address 2405 Brentwood Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City	State	Zip Code	Transaction ID: 24383590			
Houston	TX	77019-3307	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		500.00			
Name of Employer Southwest Radiology	Occupation Diagnost	n ic Radiologist				
Receipt For:	Aggregate	e Year-to-Date ▼				
Primary General Other (specify) ▼		500.00]			
Full Name (Last, First, Middle Initial) Dr. Anton Hasso			Date of Receipt			
Mailing Address Univ of CA-Irvine Me 101 The City Dr S B			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City	State	Zip Code	Transaction ID: 24383591			
Orange	CA	92868-3201	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C		250.00			
Name of Employer Univ of CA-Irvine Med Ctr	Occupation Diagnost	n ic Radiologist	7			
Receipt For:	_ , '	e Year-to-Date ▼				
Primary General		250.00	1			
Other (specify)		230.00				
SUBTOTAL of Receipts This Page (optional)			1000.00			

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 90 (check only one) X 11a 11b 11c 12 13 14 15 16 17		
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any perso g the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.		
American College of Radiology As Full Name (Last, First, Middle Initial)	SOCIATION			
Dr. Denise Collins Mailing Address 2813 Amberly Ln		Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State Zip Code	Transaction ID: 24383592		
Troy FEC ID number of contributing federal political committee.	MI 48084-2689	Amount of Each Receipt this Period 250.00		
Name of Employer Henry Ford Hospital	Occupation Diagnostic Radiologist			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) Dr. Sean Higginson Mailing Address 5554 Waterman B	lvd Apt 3E	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	City State Zip Code			
Saint Louis	MO 63112-1836	Transaction ID: 24383593 Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	1000.00		
Name of Employer Midwest Radiology Associa- tes	Occupation Diagnostic Radiologist			
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00			
Full Name (Last, First, Middle Initial) Dr. Divyang Ayar		Date of Receipt		
Mailing Address Radiology & Imagi 3226 Reid Dr	ng of S Texas	04 / 21 / Y Y Y Y Y		
City	State Zip Code	Transaction ID: 24383594		
Corpus Christi FEC ID number of contributing federal political committee.	TX 78404-2552	Amount of Each Receipt this Period 250.00		
Name of Employer Radiology & Imaging of So- uth Texas, LL Receipt For:	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	Aggregate Year-to-Date ¥			
SUBTOTAL of Receipts This Page (option	al)	1500.00		
	nber only)			

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 90 (check only one) X 11a 11b 11c 12 13 14 15 16 11	
or for commercial purposes, other than using t	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ociation		
Full Name (Last, First, Middle Initial) Dr. Rudolph Alvarado		Date of Receipt	
Mailing Address 226 Jackson PI City	State Zip Code	0 4 2 1 2 0 0 8 Transaction ID: 24383595	
Corpus Christi	TX 78411-1216	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C 79411 1210	250.00	
Name of Employer Radiology & Imaging of So- uth Texas, LL Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00		
Full Name (Last, First, Middle Initial) Dr. Mukul Maheshwari	10.7	Date of Receipt	
	Mailing Address Radiology Imaging of S Texas 3226 Reid Dr		
City	State Zip Code	Transaction ID: 24383596	
Corpus Christi	TX 78404-2552	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	250.00	
Name of Employer Radiology & Imaging of So- uth Texas, LL	Occupation Diagnostic Radiologist		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		
Full Name (Last, First, Middle Initial) Dr. Patricia Gallagher		Date of Receipt	
Mailing Address 14910 Leeward Driv	e #102	04 21 2008	
City	State Zip Code	Transaction ID: 24383600	
Corpus Christi	TX 78418-8103	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	250.00	
Name of Employer Radiology & Imaging of So- uth Texas, LL	Occupation Diagnostic Radiologist		
Receipt For: Primary General	Aggregate Year-to-Date ▼		
Other (specify)	250.00		
SUBTOTAL of Receipts This Page (optional))	750.00	
TOTAL This Period (last page this line numb	·		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 90 (check only one) X 11a
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass		,,,	
Full Name (Last, First, Middle Initial) Dr. Chandra Katragadda			Date of Receipt
Mailing Address 3462 Ocean Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Corpus Christi	State TX	Zip Code 78411-1409	Transaction ID: 24383601 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	70111100	250.00
Name of Employer Radiology & Imaging of So- uth Texas, LL Receipt For: Primary General Other (specify) ▼		n ic Radiologist Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Anthony Hein Mailing Address 25 Camden PI	'		Date of Receipt M M D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 24383602
Corpus Christi	TX	78412-2612	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Radiology & Imaging of So- uth Texas. LL	Occupatio Diagnost	n ic Radiologist	7
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		250.00	
Full Name (Last, First, Middle Initial) Dr. Jennifer Turner			Date of Receipt
Mailing Address 3551 Denver Ave			0 4 2 1 2 0 0 8
City	State	Zip Code	Transaction ID: 24383603
Corpus Christi	TX	78411-1339	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Radiology & Imaging of So- uth Texas, LL Receipt For:		ic Radiologist	
Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)	_	750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 90 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	nd Statements may not be sold or used by any person the name and address of any political committee to so- sociation	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Robert Drake Beauchamp Mailing Address 1901 Ocean Dr		Date of Receipt
	7'- 0-d-	04 21 2008
City Corpus Christi	State Zip Code TX 78404-1847	Transaction ID: 24383604 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology & Imaging of So- uth Texas, LL Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Kenneth Vanexan		Date of Receipt
Mailing Address 125 Southern St	04 21 2008	
City	State Zip Code	Transaction ID: 24383606
Corpus Christi	TX 78404-1848	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology & Imaging of So- uth Texas, LL Receipt For: Primary General	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Dwight Townsend		Date of Receipt
Mailing Address 338 Catalina Pl		0 4 2 1 2 0 0 8
City	State Zip Code	Transaction ID: 24383607
Corpus Christi	TX 78411-1602	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology & Imaging of So- uth Texas, LL	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optiona	l)	750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 90 (check only one) X
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full) American College of Radiology Asso	Statements may not be sold or used by any perso he name and address of any political committee to ociation	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Alexander Aitken		Date of Receipt
Mailing Address 200 Atlantic St		04 21 2008
City	State Zip Code	Transaction ID: 24383608
Corpus Christi	TX 78404-1839	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology & Imaging of So-	Occupation	
uth Texas, LL Receipt For:	Diagnostic Radiologist	_
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Carlos Gutierrez	_1	Date of Receipt
Mailing Address Alameda Imaging Co 3226 Reid Drive	enter	0 4 2 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	Transaction ID: 24383609	
Corpus Christi	TX 78404	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology & Imaging of So- uth Texas, LL	Occupation Diagnostic Radiologists	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Thomas Ertzner	_ 	Date of Receipt
Mailing Address 109 Ocean Way St		04 21 2008
City	State Zip Code	Transaction ID: 24383610
Corpus Christi	TX 78411-1410	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology & Imaging of So- uth Texas, LL	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
CURTOTAL of Possints This Page (antique)		750.00

SCHEDULE A (FEITEMIZED RECEIP	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 90 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from or for commercial purposes, NAME OF COMMITTEE American College of F	other than using the name and a	nay not be sold or used by any pers address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Mic			Date of Receipt
Mailing Address Fort V	Vayne Radiology New Vision Dr		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 24386213
Fort Wayne	IN	46845-1702	Amount of Each Receipt this Period
FEC ID number of contrib federal political committee			500.00
Name of Employer Ft Wayne Radiology Asso ation	Occupa Diagno	tion ostic Radiologist	
Receipt For: Primary G Other (specify) ▼	eneral Aggreg	ate Year-to-Date ▼ 500.00	
Full Name (Last, First, Mid Dr. Karence K. Chan	, 		Date of Receipt
Mailing Address 28 Ch	arity	04 / 22 / Y Y Y Y Y Y	
City	State	Zip Code	Transaction ID: 24386214
Irvine	CA	92612-3254	Amount of Each Receipt this Period
FEC ID number of contrib federal political committee			250.00
Name of Employer Newport Harbor Radiolog Associates Me	Diagno	estic Radiologist	
Receipt For:	Aggreg eneral	ate Year-to-Date ▼	_
Primary G Other (specify) ▼	eneral	250.00	
Full Name (Last, First, Mid Dr. Peter Giuliano	ddle Initial)		Date of Receipt
Mailing Address 27 Am	nargosa		04 22 2008
City	State	Zip Code	Transaction ID: 24386549
Irvine	CA	92602-2455	Amount of Each Receipt this Period
FEC ID number of contrib federal political committee			250.00
Name of Employer Newport Harbor Radiology Associates Me	Diagno	estic Radiologist	
Receipt For: Primary G Other (specify) ▼	Aggreg eneral	ate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts Th	is Page (optional)		1000.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 90 (check only one) X
A oi	ny information copied from such Reports and for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may he name and add	not be sold or used by any personess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American College of Radiology Asso	ciation		
	Full Name (Last, First, Middle Initial) Dr. Michael Roossin			Date of Receipt
	Mailing Address 9 Sea Shell			04 22 2008
	City	State	Zip Code	Transaction ID: 24386553
	Newport Coast	CA	92657-1705	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Newport Harbor Radiology Assoc.	Occupation Diagnosti	c Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
. –	Full Name (Last, First, Middle Initial) Dr. Richard Taketa			Date of Receipt
	Mailing Address 225 Poinsettia Ave			04 22 2008
	City	Transaction ID: 24386554		
	Corona Del Mar	CA	92625-3017	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Newport Harbor Radiology Associates	Occupation Diagnosti	ı c Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		250.00	
	Full Name (Last, First, Middle Initial) Dr. Thuan Tran			Date of Receipt
	Mailing Address 27482 Paseo Arco C	lave		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 24386762
	San Juan Capistran	CA	92675-1896	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Newport Harbor Radiology Associates Me	Occupation Diagnosti	ı c Radiologist	
	Receipt For:	Aggregate	Year-to-Date ▼	_
	Primary General Other (specify) ▼		250.00	
Г				750.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46/90 (check only one) X 11a
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may g the name and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology As	sociation		
Full Name (Last, First, Middle Initial) Dr. Winston Whitney			Date of Receipt
Mailing Address 113 Laurent	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State	Zip Code	Transaction ID: 24386764
Newport Beach FEC ID number of contributing federal political committee.	CA	92660-8304	Amount of Each Receipt this Period 250.00
Name of Employer Newport Radiology Associa- tes	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Michael S. Madler			Date of Receipt
Mailing Address 471 N. Old Newport Blvd. Suite #302			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Newport Beach	State CA	Zip Code 92663-4235	Transaction ID: 24386767
FEC ID number of contributing federal political committee.	C	92000-4200	Amount of Each Receipt this Period 400.00
Name of Employer Newport Harbor Radiology Associates	Occupation Chief Op	n erating Officer	
Receipt For: Primary General Other (specify) ▼	 	Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Dr. Vipin Bansal			Date of Receipt
Mailing Address Radiological Association 1500 Expo Pkwy	c of Sacramento		04 25 2008
City	State	Zip Code	Transaction ID: 24493152
Sacramento FEC ID number of contributing federal political committee.	CA	95815-4227	Amount of Each Receipt this Period 300.00
Name of Employer Radiological Assoc. of Sa- cramento		ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (option	.al)		950.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 90 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	d Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)	ocialion	
Dr. Garyun Blackmon Mailing Address 6502 Kingbird Ct		Date of Receipt M M D D V Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 24493153
Rocklin	CA 95765-5813	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Self-Employed	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) Dr. Jonathan Breslau		Date of Receipt
Mailing Address Rad Assoc of Sacra 1500 Expo Pkwy	0 4 2 5 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	Transaction ID: 24493154	
Sacramento	CA 95815-4227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Radiological Associates of Sacramento	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) Dr. George Bolton		Date of Receipt
Mailing Address 133 Yankton St		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Folsom</u>	State Zip Code CA 95630-8140	Transaction ID: 24493155 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (optiona	I)	900.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 90 (check only one) X
A or	ny information copied from such Reports and for commercial purposes, other than using th	Statements mage name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Association	ciation		
	Full Name (Last, First, Middle Initial) Dr. Nicole Carbo			Date of Receipt
	Mailing Address Rad Assoc of Sacram 1500 Expo Pkwy	nento		04 25 2008
	City	State	Zip Code	Transaction ID: 24493156
	Sacramento	CA	95815-4227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer Radiological Assoc. of Sa- cramento	Occupatio Diagnost	n tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		325.00	
	Full Name (Last, First, Middle Initial) Dr. Christopher Chong			Date of Receipt
	Mailing Address 27075 E El Macero			0 4 2 5 2 0 0 8
	City	State	Zip Code	Transaction ID: 24493159
	El Macero	CA	95618-1006	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Radiological Assoc. of Sa- cramento	Occupatio Diagnost	n tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		650.00	
	Full Name (Last, First, Middle Initial) Dr. Huu-Ninh Dao			Date of Receipt
	Mailing Address 2627 Rockwell Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 24493160
	Davis	CA	95618-7664	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Radiological Associates of Sacramento	Occupatio Diagnost	n tic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	_
	Other (specify)		650.00	
Г	SUBTOTAL of Receipts This Page (optional) .	I		750.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 90 (check only one) X 11a 11b 11c 12 13 14 15 16
A or	ny information copied from such Reports and for commercial purposes, other than using t	Statements may not be sold or used by any pene name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Asso	ociation	
	Full Name (Last, First, Middle Initial) Dr. John De la Vega		Date of Receipt
	Mailing Address Rad Assoc of Sacrar 1500 Expo Pkwy		04 25 7 2008
	City	State Zip Code	Transaction ID: 24493161
	Sacramento	CA 95815-4227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	600.00
	Name of Employer Radiological Assoc. of Sa-	Occupation Diagnostic Radiologist	
	cramento Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1300.00	
_	Full Name (Last, First, Middle Initial) Dr. Roland DeMarco		Date of Receipt
	Mailing Address 5174 Prior Rdg		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State Zip Code	Transaction ID: 24493162
	Granite Bay	CA 95746-7186	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	325.00	
	Full Name (Last, First, Middle Initial) Dr. Scott Foster		Date of Receipt
	Mailing Address Radiological Assoc of 1500 Expo Pkwy	of Sacramento	04 25 2008
	City	State Zip Code	Transaction ID: 24493163
	Sacramento	CA 95815-4227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	650.00	
			1050.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Page	e Concect of my office
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	the name and address of any political comm	ny person for the purpose of soliciting contributions nittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Hani Greiss Mailing Address Radiological Assoc 1500 Expo Pkwy	of Sacramento	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 24493216
Sacramento	CA 95815-4227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Radiological Assoc. of Sacramento Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 650.	00
Full Name (Last, First, Middle Initial) Dr. Patrick Harty Mailing Address 5249 Wyndham Oa	k Ln	Date of Receipt
		04 25 2008
City	State Zip Code	Transaction ID: 24493217
Carmichael FEC ID number of contributing federal political committee.	CA 95608-3472	Amount of Each Receipt this Period 300.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ♥	Aggregate Year-to-Date ▼ 650.	00
Full Name (Last, First, Middle Initial) Dr. Christopher Hoffman		Date of Receipt
Mailing Address 1117 Teneighth Wa	у	0 4 2 5 2 0 0 8
City	State Zip Code	Transaction ID: 24493218
Sacramento	CA 95818-4024	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	252.00
Name of Employer Self-Employed	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 546.	00
SUBTOTAL of Receipts This Page (optional	I	852.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	5X)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 90 (check only one)
Any information copied from such Reports or for commercial purposes, other than using	and Statements may	not be sold or used by any personess of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Radiology A		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Full Name (Last, First, Middle Initial) Dr. Jeffrey Kuo			Date of Receipt
Mailing Address 2619 Mariella Dr	0 4 2 5 2 0 0 8		
City Rocklin	State CA	Zip Code 95765-5618	Transaction ID: 24493219 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Radiological Assoc. of Sa- cramento		c Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) Dr. Hank Lin	Date of Receipt		
Mailing Address 44408 Clubhouse Drive			0 4 2 5 Y Y Y Y Y Y
City El Macero	State CA	Zip Code 95618-1021	Transaction ID: 24493225 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Self-Employed	Occupation Diagnosti	c Radiologist	
Receipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) Dr. Don Charles Loomer			Date of Receipt
Mailing Address 1747 E Wallington	n Ln		0 4 2 5 2 0 0 8
City Fresno	State CA	Zip Code 93730-3596	Transaction ID: 24493226
FEC ID number of contributing federal political committee.	C	93730-3390	Amount of Each Receipt this Period 300.00
Name of Employer Radiological Assoc. of Sa- cramento		c Radiologist	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (optio	nal)		900.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 90 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may	v not be sold or used by any pers	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Radiology Asso		aress of any political committee to	7 Solicit Continuations from Such Committee.
Full Name (Last, First, Middle Initial) Dr. Vartan Malian			Date of Receipt
Mailing Address 100 Crane Meadow C	Ct		0 4 2 5 2 0 0 8
City	State	Zip Code	Transaction ID: 24493227
Roseville	CA	95661-4030	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		300.00
Name of Employer Radiological Assoc. of Sa-	Occupation	n ic Radiologist	
cramento Receipt For:		e Year-to-Date	\dashv
Primary General	Aggregate	; i ∈ai-lU-Dale ▼	7
Other (specify) ▼		650.00	
Full Name (Last, First, Middle Initial) Dr. Mylon Marshall	· 		Date of Receipt
Mailing Address 2201 Lassen Pl			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 24493228
<u>Davis</u>	CA	95616-6604	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 650.00	
Full Name (Last, First, Middle Initial) Dr. Charles McDonnell, III			Date of Receipt
Mailing Address 5436 Ridge Park Dr			04 25 2008
City	State	Zip Code	Transaction ID: 24493229
Loomis	CA	95650-7701	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnost	n ic Radiologist	
Receipt For:	_ ' 	e Year-to-Date ▼	
Primary General Other (specify) ▼	33 13411	650.00	
SUBTOTAL of Receipts This Page (optional)			900.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 90 (check only one) X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology Ass	d Statements may not be sold or used by any persor the name and address of any political committee to so ociation	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Miyuki Murphy Mailing Address 5198 Prior Rdg		Date of Receipt
		04 25 2008
City	State Zip Code	Transaction ID: 24493231
Granite Bay FEC ID number of contributing federal political committee.	CA 95746-7186	Amount of Each Receipt this Period
Name of Employer Radiological Assoc. of Sa- cramento Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) Dr. Michael Norton		Date of Receipt
Mailing Address Rad Assoc of Sacra 1500 Expo Pkwy	04 25 2008	
City	State Zip Code	Transaction ID: 24493232
Sacramento	CA 95815-4227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Rad Assoc of Sacramento Med Gr Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Narasimhachari Raghavan		Date of Receipt
Mailing Address 3157 Oak Cliff Cir		04 25 2008
City	State Zip Code	Transaction ID: 24493233
Carmichael	CA 95608-4571	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	600.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1300.00	
SUBTOTAL of Receipts This Page (optional	l)	1000.00

	CHEDULE A (FEC Form 3X EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 90 (check only one) X
A	ny information copied from such Reports and for commercial purposes, other than using t	Statements may not be sold or used by any pe he name and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Asso	ociation	
	Full Name (Last, First, Middle Initial) Dr. Christopher Schaefer		Date of Receipt
	Mailing Address Radiological Assoc of 1500 Expo Pkwy	of Sacramento	04 25 2008
	City	State Zip Code	Transaction ID: 24493234
	Sacramento	CA 95815-4227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	650.00	
	Full Name (Last, First, Middle Initial) Dr. Albert Schraner	1	Date of Receipt
	Mailing Address 5300 Tufts St		04 25 7 2008
	City	State Zip Code	Transaction ID: 24493235
	Davis	CA 95616-7219	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	650.00	
_	Full Name (Last, First, Middle Initial) Dr. David Seidenwurm		Date of Receipt
	Mailing Address 2806 Hoffman Bluff	Way	04 25 2008
	City	State Zip Code	Transaction ID: 24493243
	Carmichael	CA 95608-4522	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	650.00	
Г		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for each cat	e schedule(s) egory of the mmary Page	FOR LINE NUMBER: PAGE 55 / 90 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may not be sold or name and address of any pol	used by any persor itical committee to	
American College of Radiology Assoc	ation		
Full Name (Last, First, Middle Initial) Dr. Christopher Simopoulos			Date of Receipt
Mailing Address Rad Assoc of Sacram 1500 Expo Pkwy	04 25 7 2008		
City	State Zip Code		Transaction ID: 24493244
Sacramento	CA 95815-422	27	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Radiological Assoc. of Sa-	Occupation		7
cramento	Diagnostic Radiologis		
Receipt For:	Aggregate Year-to-Date	▼	
Primary ☐ General Other (specify) ▼		650.00	
Full Name (Last, First, Middle Initial) Dr. James Steidler	1		Date of Receipt
Mailing Address 1806 Vela PI			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code		Transaction ID: 24493245
<u>Davis</u>	CA 95616-676	60	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologis	t	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date	650.00	
Full Name (Last, First, Middle Initial) Dr. Bahram Varjavand			Date of Receipt
Mailing Address 1355 35th St			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code		Transaction ID: 24493246
Sacramento	CA 95816-530	07	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		150.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologis	t	
Receipt For:	Aggregate Year-to-Date	▼	
Primary General Other (specify) ▼		325.00	
SUBTOTAL of Receipts This Page (optional)	I	>	750.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	for each ca	ate schedule(s) ategory of the ummary Page	FOR LINE NUMBER: PAGE 56 / 90 (check only one) X 11a 11b 11c 12 13 14 15 16 11
A or	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold one name and address of any posterior	r used by any persor plitical committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
	American College of Radiology Associ	iation		
	Full Name (Last, First, Middle Initial) Dr. Calvin Wang			Date of Receipt
	Mailing Address Rad Assoc of Sacram 1500 Expo Pkwy	ento		04 25 2008
	City	State Zip Code		Transaction ID: 24493247
	Sacramento	CA 95815-4	227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		550.00
	Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologi	st	
	Receipt For:	Aggregate Year-to-Date	▼	
	Primary General Other (specify) ▼	0 0 0 0	900.00	
	Full Name (Last, First, Middle Initial) Dr. David Winfield	l		Date of Receipt
	Mailing Address Rad Assoc of Sacramento 1500 Expo Pkwy			04 25 7 2008
	City	Transaction ID: 24493249		
	Sacramento FEC ID number of contributing federal political committee.	CA 95815-4	221	Amount of Each Receipt this Period 300.00
	Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologi	st	
	Receipt For:	Aggregate Year-to-Date	▼	
	Primary General Other (specify) ▼		650.00	
	Full Name (Last, First, Middle Initial) Dr. Dylan Witt	I		Date of Receipt
	Mailing Address 3636 Washoe St			04 25 2008
	City	State Zip Code		Transaction ID: 24493250
	Davis	CA 95616-5	087	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologi		
	Receipt For: Primary General	Aggregate Year-to-Date	▼	
	Other (specify)		650.00	
Г				1150.00

SCHEDULE A (FEC Form 3. ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 90 (check only one) X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American College of Radiology As	and Statements may not be sold or used by any persor g the name and address of any political committee to sesociation	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Frederic Conte Mailing Address 918 Colby Dr		Date of Receipt
		04 25 2008
City	State Zip Code	Transaction ID: 24493251
<u>Davis</u> FEC ID number of contributing federal political committee.	CA 95616-1758	Amount of Each Receipt this Period 150.00
Name of Employer Radiological Assoc. of Sa- cramento Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 325.00	_
Full Name (Last, First, Middle Initial) Dr. Benjamin Franc		Date of Receipt
Mailing Address Radiological Association Report Reports Report Reports Report Reports	0 4 2 5 2 0 0 8	
City	State Zip Code	Transaction ID: 24493252
Sacramento	CA 95815-4227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer University of California	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Dr. Michael Haseman		Date of Receipt
Mailing Address 227 Selby Ranch F	Rd Apt 3	0 4 25 2 0 0 8
City	State Zip Code CA 95864-5844	Transaction ID: 24493254
Sacramento		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (option	nal)	750.00

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 90 (check only one) X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full) American College of Radiology As	nd Statements may not be sold or used by any perso g the name and address of any political committee to sociation	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Richard W. Myers Mailing Address 1500 Expo Parkwa City Sacramento	State Zip Code CA 95815-4227	Date of Receipt M M
FEC ID number of contributing federal political committee.	C Occupation	150.00
Name of Employer Radiological Associates of Sacramento Receipt For: Primary General Other (specify) ▼	Diagnostic Radiologist Aggregate Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) Dr. Sharon Dutton Mailing Address Rad Assoc of Sac	amento	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Sacramento FEC ID number of contributing federal political committee.	State Zip Code CA 95815-4227	Transaction ID: 24493256 Amount of Each Receipt this Period 300.00
Name of Employer Radiological Assoc. of Sa- cramento Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 650.00	
Full Name (Last, First, Middle Initial) Dr. Roger Gilbert		Date of Receipt
Mailing Address Rad Assoc of Sac 1500 Expo Pkwy City	amento State Zip Code	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Sacramento FEC ID number of contributing federal political committee.	CA 95815-4227	Amount of Each Receipt this Period 300.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Radiation Oncologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	
SUBTOTAL of Receipts This Page (option	al)	750.00

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC FOR ITEMIZED RECEIPTS	Use separate so for each catego Detailed Summ	ry of the (check only only)	
Any information copied from such or for commercial purposes, other NAME OF COMMITTEE (In Fundamental College of Radio	nan using the name and address of any politica	ed by any person for the purpose of soliciting contributions all committee to solicit contributions from such committee.	
Full Name (Last, First, Middle In Dr. Brian Goldsmith	tial)	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: 24493258	
Sacramento	CA 95816-5616	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	150.00	
Name of Employer Radiological Assoc. of Sa- cramento Receipt For: Primary Genera Other (specify) ▼	Occupation Radiation Oncologist Aggregate Year-to-Date	325.00	
Full Name (Last, First, Middle In Dr. Susan Lee Mailing Address Radiologic	itial)	Date of Receipt	
1500 Expo	04 25 2008		
City	Transaction ID: 24493259		
Sacramento FEC ID number of contributing federal political committee.	CA 95815-4227	Amount of Each Receipt this Period 600.00	
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Radiation Oncologist		
Receipt For: Primary Genera Other (specify) ▼	Aggregate Year-to-Date ▼	1300.00	
Full Name (Last, First, Middle II Dr. David Linstadt	tial)	Date of Receipt	
2 Medical	2 Medical Plaza Dr Ste 180		
City Roseville	State Zip Code CA 95661-3049	Transaction ID: 24493260 Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	300.00	
Name of Employer Radiation Oncology Centers	Occupation Radiation Oncologist		
Receipt For: Primary Genera Other (specify) ▼	Aggregate Year-to-Date ▼	400.00	
CURTOTAL of Descints This De	e (optional)	1050.00	

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 60 / 90 (check only one) X 11a 11b 11c 12 13 14 15 16 17
or for cor	mation copied from such Reports and S nmercial purposes, other than using the E OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
\	rican College of Radiology Associ	ation		
Dr. Ma	lame (Last, First, Middle Initial) ark Logsdon g Address - Rad Associates of Sac			Date of Receipt
iviaiiii	g Address Rad Associates of Sac 1500 Expo Pkwy	ramento		04 25 2008
City		State	Zip Code	Transaction ID: 24493261
<u>Sacr</u>	amento	CA	95815-4227	Amount of Each Receipt this Period
	D number of contributing al political committee.	C		300.00
Name Radio crame	e of Employer ological Assoc. of Sa- ento	Occupation Radiation	n n Oncologist	
	pt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		650.00	
Dr. Ar	lame (Last, First, Middle Initial) nthony Pu	Date of Receipt		
	Mailing Address Radiological Assoc of Sacramento 1500 Expo Pkwy City State Zip Code			04 25 7 2008
City	amento	Transaction ID: 24493262		
FEC	D number of contributing al political committee.	CA	95815-4227	Amount of Each Receipt this Period 150.00
Name Radio rame	e of Employer ological Assoc of Sac- n	Occupation Radiation	n n Oncologist	
Recei	pt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	0 0	325.00]
	lame (Last, First, Middle Initial) eth Rosenthal	I		Date of Receipt
	Mailing Address Rad Assoc of Sacramento 1500 Expo Pkwy			04 25 2008
City	amonto	State CA	Zip Code	Transaction ID: 24493263
FEC	amento D number of contributing all political committee.	C	95815-4227	Amount of Each Receipt this Period 150.00
Name Radio	e of Employer ological Assoc. of Sa-	Occupatio	n n Oncologist	
<u>crame</u> Recei	ento pt For:	. '	e Year-to-Date	
	Primary General Other (specify) ▼	1.33.03410	325.00]
SUBTO	TAL of Receipts This Page (optional))	600.00
TOTAL	This Period (last page this line number	only)		

ITI	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS y information copied from such Reports and St	tatements may	Use separate schedule(s) for each category of the Detailed Summary Page	13 1	11b 11c 12 14 15 16 17
or f	or commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associa	name and add	dress of any political committee to	solicit contribution	s from such committee.
A.	Full Name (Last, First, Middle Initial) Dr. Robert Krugman Mailing Address 10 Lexington Ct City Englewood FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General	, <u> </u>	Zip Code 07631-3081 n ic Radiologist Year-to-Date ▼	0 4 Transaction	2 5 2 0 0 8 ID: 24493267 ach Receipt this Period 38.46
B.	Other (specify) Full Name (Last, First, Middle Initial) Dr. Andrew Osiason Mailing Address 506 Julie Ct City Wyckoff FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify)	, '	Zip Code 07481-1101	0 4 Transaction	eipt 2 5
C.	Full Name (Last, First, Middle Initial) Dr. David Panush Mailing Address 538 E 84th St Apt 4E City New York FEC ID number of contributing federal political committee. Name of Employer Hackensack Radiology Group Receipt For: Primary General Other (specify)		Zip Code 10028-7357 n ic Radiologist Year-to-Date ▼ 346.14	0 4 Transaction	25 2008 ID: 24493269 ach Receipt this Period 38.46
SU	JBTOTAL of Receipts This Page (optional)				115.38

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 90 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Associa	ation	
Full Name (Last, First, Middle Initial) Dr. Joel Rakow		Date of Receipt
Mailing Address 505 Ivy Lane	-	04 25 2008
City Wyckoff	State Zip Code NJ 07481-1072	Transaction ID: 24493270 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 346.14	
Full Name (Last, First, Middle Initial) Dr. Patrick Toth		Date of Receipt
Mailing Address 201 E 80th St Apt 8F		0 4 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 24493272
New York	NY 10021-0515	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 346.14	
Full Name (Last, First, Middle Initial) Dr. John DeMeritt		Date of Receipt
Mailing Address 18 Baldwin Rd		0 4
City	State Zip Code	Transaction ID: 24493273
Saddle River FEC ID number of contributing federal political committee.	NJ 07458-3203	Amount of Each Receipt this Period 38.46
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 346.14	
SUBTOTAL of Receipts This Page (optional)		115.38
TOTAL This Period (last page this line number of	<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 63 / 90 (check only one) X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ociation	
Full Name (Last, First, Middle Initial) Dr. Hiten Magan Malde		Date of Receipt
Mailing Address 7 Kinkaid Ave		04 25 2008
City	State Zip Code	Transaction ID: 24493274
Closter	NJ 07624-2908	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	346.14	
Full Name (Last, First, Middle Initial) Dr. Arthur S. Albert		Date of Receipt
Mailing Address 124 W 60th St Apt 4	5	04 25 7 2008
City	State Zip Code	Transaction ID: 24493275
New York	NY 10023-7451	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	346.14	
Full Name (Last, First, Middle Initial) Dr. Adam Bogomol		Date of Receipt
Mailing Address 50 W 72nd St Apt 15	509	04 25 2008
City	State Zip Code	Transaction ID: 24493276
New York	NY 10023-4132	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	346.14]
CURTOTAL of Descints This Daws (entianal)		115.38

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 90 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person g the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology As	sociation	
Full Name (Last, First, Middle Initial) Dr. Rita S. Patel		Date of Receipt
Mailing Address 3 Ware Rd	7.0.1	04 25 2008
City Upper Saddle River	State Zip Code NJ 07458-1919	Transaction ID: 24493277
FEC ID number of contributing federal political committee.	C 0/436-1919	Amount of Each Receipt this Period 38.46
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 346.14	
Full Name (Last, First, Middle Initial) Dr. Mitchell Miller	l	Date of Receipt
Mailing Address 2 Constitution Ct A	04 25 2008	
City	State Zip Code	Transaction ID: 24493278
<u>Hoboken</u>	NJ 07030-6730	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 346.14	
Full Name (Last, First, Middle Initial) Dr. Sean D. Pierce		Date of Receipt
Mailing Address 47-30 Vernon Blvd	Unit 1R	04 25 7 2008
City	State Zip Code	Transaction ID: 24493279
Long Island City	NY 11101-5546	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 346.14	
SUBTOTAL of Receipts This Page (option	al)	115.38
TOTAL This Period (last page this line nun	nber only)	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS Any information copied from such Reports :	Use separate schedule(s) for each category of the Detailed Summary Page and Statements may not be sold or used by any person	FOR LINE NUMBER: PAGE 65 / 90 (check only one) X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full) American College of Radiology As	ng the name and address of any political committee to s	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. George Joseph Ferrone Mailing Address 440 E 62nd St Ap	+ 10F	Date of Receipt
Maining Address 440 E 62110 St Ap	LIOF	04 25 2008
City	State Zip Code	Transaction ID: 24493280
New York FEC ID number of contributing federal political committee.	NY 10065-8345	Amount of Each Receipt this Period 38.46
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 346.14	
Full Name (Last, First, Middle Initial) Dr. Harry Agress, JR		Date of Receipt
Mailing Address Hackensack University 30 Prospect Ave	ersity Medical Ctr	0 4 2 5 2 0 0 8
City	State Zip Code	Transaction ID: 24493281
<u>Hackensack</u>	NJ 07601-1914	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	1
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 346.14	
Full Name (Last, First, Middle Initial) Dr. Joel Budin		Date of Receipt
Mailing Address 140 Chestnut St		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 24493282
Englewood	NJ 07631-3033	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	38.46
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 346.14	
SURTOTAL of Descripts This Description	nal)	115.38

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 90 (check only one) X 11a
An	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Associ	e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\ <u></u>	Full Name (Last, First, Middle Initial) Dr. Janet Storella Mailing Address 6515 Fallwind Ln			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Bethesda	State MD	Zip Code 20817-4941	Transaction ID: 24501242
	FEC ID number of contributing federal political committee.	C	20017-4941	Amount of Each Receipt this Period 40.00
	Name of Employer Drs Grover, Christie & Me- rritt Receipt For: Primary General Other (specify) ▼	, ' 	n tic Radiologist e Year-to-Date ▼ 360.00	wire
<u> </u>	Full Name (Last, First, Middle Initial) Dr. Shawn Teague Mailing Address 11844 Tarver Ct	I		Date of Receipt 0 4 2 9 2 0 0 8
	City	State	Zip Code	Transaction ID: 24503355
	Fishers FEC ID number of contributing federal political committee.	C	46037-8277	Amount of Each Receipt this Period 250.00
	Name of Employer Indiana Univ School of Medicine Receipt For:	,	n tic Radiologist e Year-to-Date ▼	
	Primary General Other (specify) ▼	Aggregate	250.00]
	Full Name (Last, First, Middle Initial) Dr. Michael DeVenny			Date of Receipt
	Mailing Address 3090 Yorktown Dr			04 29 2008
	City	State	Zip Code	Transaction ID: 24503356
	Tuscaloosa FEC ID number of contributing federal political committee.	C	35406-2713	Amount of Each Receipt this Period 250.00
	Name of Employer The Radiology Clinic	Occupatio	n tic Radiologist	7
	Receipt For: Primary General Other (specify) ▼	, · · · ·	e Year-to-Date ▼ 500.00	
S	UBTOTAL of Receipts This Page (optional) .			540.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 90 (check only one) X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American College of Radiology Association	name and add	r not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. Bill Warren			Date of Receipt
Mailing Address UWMC Box 357115 City	State	Zip Code	0 4 2 9 2 0 0 8 Transaction ID: 24503357
Seattle FEC ID number of contributing federal political committee.	C	98195-7115	Amount of Each Receipt this Period 250.00
Name of Employer University of Washington Receipt For:	, ' 	n c Radiologist Year-to-Date ▼	_
Primary General Other (specify) ▼	Aggregate	500.00	
Full Name (Last, First, Middle Initial) Dr. Judy Greene Mailing Address 7104 Hunters Crk			Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Dayton	State OH	Zip Code 45459-3466	Transaction ID: 24503358 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1 1 1 1 1 1	125.00
Name of Employer Kettering Network Radiolo- gists	Occupation Diagnosti	n c Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Michael George			Date of Receipt
Mailing Address 1620 John St S			04 29 2008
City Salem	State OR	Zip Code 97302-5110	Transaction ID: 24503359 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Univ of Iowa Hospitals & Clinics Receipt For:	, ' 	n c Radiologist Year-to-Date ▼	
Primary General Other (specify) ▼	Aggregate	500.00	
SUBTOTAL of Receipts This Page (optional)	1		625.00
TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 68 / 90 (check only one)
TEMIZED RECEIF 13		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	ociation		
Full Name (Last, First, Middle Initial) Dr. William Herrington			Date of Receipt
Mailing Address 1110 Laurel Pl			0 4 2 9 2 0 0 8
City	State	Zip Code	Transaction ID: 24503360
Athens	GA	30606-5789	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		625.00
Name of Employer Athens Radiology Associat-	Occupation	n ic Radiologist	
es Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼	. igg. iga.c	1250.00	
Full Name (Last, First, Middle Initial) Dr. Jeffrey Hu			Date of Receipt
Mailing Address 302 Topwater Ln			04 29 2008
City	State	Zip Code	Transaction ID: 24503376
Greensboro	NC	27455-3423	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		60.00
Name of Employer Greensboro Radiology	Occupation Diagnost	n ic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) Dr. Marcela Bohm-Velez			Date of Receipt
Mailing Address Weinstein Imaging 5850 Centre Ave	Associates		04 29 2008
City	State	Zip Code	Transaction ID: 24503377
Pittsburgh	PA	15206-3780	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		166.67
Name of Employer Weinstein Imaging Associa- tes	Occupation Diagnost	n ic Radiologist	
Receipt For:	Aggregate	e Year-to-Date 🔻	
Primary General Other (specify) ▼		666.68	
SUBTOTAL of Receipts This Page (optional			851.67

SCHEDULE A (FEC Form 3X)

	JLE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 90 (check only one) X 11a
or for comme	tion copied from such Reports and Si ercial purposes, other than using the F COMMITTEE (In Full) an College of Radiology Associ	name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	e (Last, First, Middle Initial) Mansour, JR ddress Central LA Imaging Inc 3704 North Blvd Ste A	;		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 24503399
<u>Alexand</u>	dria	LA	71301-3606	Amount of Each Receipt this Period
	number of contributing plitical committee.	C		83.34
	Employer A Imaging Inc.	Occupation Diagnos	n tic Radiologist	
	For: mary General ner (specify) ♥	Aggregate	e Year-to-Date ▼ 333.36	
Dr. Gerald	· · · · · · · · · · · · · · · · · · ·			Date of Receipt
Mailing A	ddress Univ of Texas Hlth Sci 7703 Floyd Curl Dr			04 29 2008
City	tamia	State	Zip Code	Transaction ID: 24503437
	number of contributing olitical committee.	C	78229-3901	Amount of Each Receipt this Period 83.34
Name of Univ of T	Employer exas Hith Sci Ctr	Occupation Diagnost	n tic Radiologist	
	For: mary General ner (specify) ♥	Aggregate	e Year-to-Date ▼ 333.36	
Full Name	e (Last, First, Middle Initial) ax			Date of Receipt
Mailing A	ddress 9 Old Sudbury Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 24503453
<u>Lincoln</u>		MA	01773-4807	Amount of Each Receipt this Period
	number of contributing political committee.	C		83.34
	ging Institute	_ '	tic Radiologist	
	For: mary General ner (specify) ♥	Aggregate	e Year-to-Date ▼ 333.36	
SUBTOTAL				250.02

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 90 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Asso	ociation	
Full Name (Last, First, Middle Initial) Dr. Linda Brown		Date of Receipt
Mailing Address 3360 Bridle Run Trl		04 29 2008
City Marietta	State Zip Code GA 30064-1788	Transaction ID: 24503502 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Quantum Radiology Northwe- st	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Gregory Gordon		Date of Receipt
Mailing Address Decatur Memorial Ho 2300 N Edward St	ospital	04 29 7 2008
City	State Zip Code	Transaction ID: 24503503
Decatur FEC ID number of contributing federal political committee.	IL 62526-4163	Amount of Each Receipt this Period 500.00
Name of Employer St. Luke's Hospital	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. J Daniel Hanks, JR		Date of Receipt
Mailing Address Rome Radiology Gro	oup PA Blvd NE	04 29 2008
City Rome	State Zip Code GA 30165-1694	Transaction ID: 24503525
FEC ID number of contributing federal political committee.	C 30103-1094	Amount of Each Receipt this Period
Name of Employer Rome Radiology Group, PA	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional))	1750.00
TOTAL This Period (last page this line numb		

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee. NAME OF COMMITTEE (in Full) American College of Radiology Association Full Name (Last, First, Middle Initial) Dr. Goral Roth Mailing Address 2633 Basil Ln City State Zip Code CA 90077-2005 FEC ID number of contributing tederal political committee. Pull Name (Last, First, Middle Initial) Dr. Roral Roth Name (Last, First, Middle Initial) Dr. Roral Roth Name (Last, First, Middle Initial) Dr. Ruth Brush Mailing Address Mercy Health Center 4300 W Memorial Road City Oklahoma City Oklahoma City Name of Employer Occupation Dr. Init Choo Name of Employer Octorphism Other (specify) ▼ Pull Name (Last, First, Middle Initial) Dr. Ruth Brush Receipt Fo: Other (specify) ▼ Occupation Dr. Init Choo Mailing Address So General Other (specify) ▼ Occupation Dr. Init Choo Mailing Address So General Other (specify) ▼ Occupation Dr. Init Choo Mailing Address So General Other (specify) ▼ Occupation Dr. Init Choo Mailing Address So General Other (specify) ▼ Occupation Dr. Init Choo Mailing Address So General Other (specify) ▼ Occupation Dr. Init Choo Mailing Address So General Other (specify) ▼ Occupation Dr. Init Choo Newport Harbor Radiology Associated Mailor Associated Mailor Radiologist Receipt Fo: Primary General Other (specify) ▼ Occupation Diagnostic Radiologist Receipt Fo: Primary General Other (specify) ▼ Occupation Diagnostic Radiologist Receipt Fo: Primary General Other (specify) ▼ Occupation Diagnostic Radiologist Receipt Fo: Primary General Other (specify) ▼ Occupation Diagnostic Radiologist Receipt Fo: Primary General Other (specify) ▼ Occupation Diagnostic Radiologist Receipt Fo: Primary General Other (specify) ▼ Occupation Diagnostic Radiologist Receipt Fo: Primary General Other (specify) ▼ Occupation Diagnostic Radiologist Receipt Fo: Primary General Other (specify) ▼	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 90 (check only one) X
American College of Radiology Association Full Name (Last, First, Middle Initial) Dr. Gerald floth Mailing Address 2633 Basil Ln City State Zip Code Los Angeles CA 90077-2005 FEC ID number of contributing tederal political committee. Name of Employer Tower Innaging Other (specify) ▼ Full Name (Last, First, Middle Initial) Dr. Ruth Rush Mailing Address Mercy Health Center 4300 W Memorial Road City State Zip Code Diagnostic Radiologist FEC ID number of contributing tederal political committee. City State Zip Code City State Zip Code City Oklahoma City OK 73120-3352 FEC ID number of contributing federal political committee. City State Zip Code Diagnostic Radiologist Receipt For: Primary General City State Zip Code Diagnostic Radiologist Receipt For: Primary General City State Zip Code Transaction ID: 24503528 Amount of Each Receipt this Period Diagnostic Radiologist Receipt For: Primary General City State Zip Code Diagnostic Radiologist Receipt For: Primary General City State Zip Code Diagnostic Radiologist Receipt For: Primary General City State Zip Code Diagnostic Radiologist Receipt For: Primary General City State Zip Code Diagnostic Radiologist Receipt For: Primary General City State Zip Code Diagnostic Radiologist Receipt For: Primary General City State Zip Code Diagnostic Radiologist Aggregate Year-to-Date ▼ Date of Receipt Date of Receipt Date of Receipt Amount of Each Receipt this Period C C Coupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Primary General City Cast Scaladise Me Receipt For: Primary General City Cast Cast Cast Cast Cast Cast Cast Cast	or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
D. Gerald Roth Mailing Address 2633 Basil Ln City State Zip Code Los Angeles CA 90077-2005 FEC ID number of contributing federal political committee. Name of Employer Oker Specify) ▼ Full Name (Last, First, Middle Initial) Dr. Ruth Brush Mailing Address Mercy Health Center 4300 W Memorial Road City State Zip Code Oklahoma City OK 73120-3362 FEC ID number of contributing federal political committee. C State Zip Code Oklahoma City OK 73120-3362 Fec ID number of contributing federal political committee. C State Zip Code Oklahoma City OK 73120-3362 Fec ID number of contributing federal political committee. C State Zip Code Oklahoma City Occupation Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ C State Zip Code Primary General Other (specify) ▼ C State Zip Code Primary General Other (specify) ▼ C State Zip Code Primary General Other (specify) ▼ C State Zip Code Primary General Other (specify) ▼ C State Zip Code Primary General Other (specify) ▼ C State Zip Code Primary General Other (specify) ▼ C State Zip Code Primary General Other (specify) ▼ C State Zip Code Primary General Other (specify) ▼ C State Zip Code Agorgate Year-to-Date ▼ Primary General Other (specify) ▼	1 \	iation	
City State Zip Code CA 90077-2005 FEC ID number of contributing federal political committee. C	Dr. Gerald Roth		┪ '
Los Angeles		State Zip Code	04 29 2008
FEC ID number of contributing federal political committee. Name of Employer Tower Imaging Diagnostic Radiologist Receipt For:	-	•	
Tower Imaging Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ State Zip Code Occupation Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ State Zip Code Oklahoma City Occupation Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ State Zip Code Occupation Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ State Zip Code Occupation Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ State Zip Code Occupation Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ State Zip Code Aggregate Year-to-Date ▼ Transaction ID: 24503528 Transaction ID: 24503528 Transaction ID: 24503528 Transaction ID: 24503530 Date of Receipt Date of Receipt Date of Receipt Transaction ID: 24503530 Transaction ID: 24503530 Amount of Each Receipt this Period Date of Receipt Date of Receipt Date of Receipt Date of Receipt Transaction ID: 24503530 Amount of Each Receipt this Period Date of Receipt Date		C	
Primary	Name of Employer Tower Imaging	· '	
Dr. Ruth Brush Mailing Address Mercy Health Center 4300 W Memorial Road City City Oklahoma City Ok 73120-8362 FEC ID number of contributing federal political committee. Name of Employer Newport Loast City State Zip Code Occupation Diagnostic Radiologist Receipt For: Primary City State Zip Code Aggregate Year-to-Date ▼ Date of Receipt M M 29 2008 Transaction ID: 24503528 Amount of Each Receipt this Period Date of Receipt M M 29 2008 Transaction ID: 24503528 Amount of Each Receipt this Period Date of Receipt Date of Receipt M M M 29 2008 Transaction ID: 24503528 Amount of Each Receipt this Period Date of Receipt Date of Receipt Aggregate Year-to-Date ▼ Date of Receipt Transaction ID: 24503530 Amount of Each Receipt this Period Date of Receipt Aggregate Year-to-Date ▼ Date of Receipt Aggregate Year-to-Date ▼ Date of Receipt Amount of Each Receipt this Period Date of Receipt Date of Recei	Primary General	500.00	
City State Zip Code Oklahoma City OCCUpation FEC ID number of contributing federal political committee. Name of Employer Mercy Health Center Other (specify) ▼ Cupation Diagnostic Radiologist Full Name (Last, First, Middle Initial) Dr. Iris Choo Mailing Address 50 Renata City State Zip Code CA 92657-1231 FEC ID number of contributing federal political committee. Ca 92657-1231 Date of Receipt Transaction ID: 24503528 Amount of Each Receipt this Period Date of Receipt Transaction ID: 24503530 Transaction ID: 24503530 Amount of Each Receipt this Period Ca 92657-1231 Transaction ID: 24503530 Amount of Each Receipt this Period Ca 92657-1231 Fec ID number of contributing federal political committee. Name of Employer Newport Harbor Radiology Associates Me Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Ca 92657-1231 Ca 92657-1231 Aggregate Year-to-Date ▼ Ca 92657-1231 Aggregate Year-to-Date ▼ Ca 92657-1231 Aggregate Year-to-Date ▼ Ca 92657-1231			Date of Receipt
Oklahoma City OK 73120-8362 Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Name of Employer Mercy Health Center Diagnostic Radiologist Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ City State Zip Code CA 92657-1231 FEC ID number of contributing federal political committee. Name of Employer Newport Harbor Radiology Associates Me Receipt For: Primary General Occupation Diagnostic Radiologist Amount of Each Receipt this Period Date of Receipt Transaction ID: 24503530 Amount of Each Receipt this Period Date of Receipt Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ Date of Receipt Amount of Each Receipt this Period Transaction ID: 24503530 Amount of Each Receipt this Period Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ Primary General Other (specify) ▼	4300 W Memorial Roa		04 29 2008
FEC ID number of contributing federal political committee. Name of Employer Mercy Health Center Primary	•	•	
Name of Employer Mercy Health Center Diagnostic Radiologist	Oklahoma City	OK 73120-8362	Amount of Each Receipt this Period
Diagnostic Radiologist		C	250.00
Primary General Other (specify) ▼ Date of Receipt	Name of Employer Mercy Health Center	· ·	
Other (specify) ▼ Pull Name (Last, First, Middle Initial)		Aggregate Year-to-Date ▼	
Dr. Iris Choo Mailing Address 50 Renata City State Zip Code Newport Coast CA 92657-1231 FEC ID number of contributing federal political committee. Name of Employer Newport Harbor Radiology Associates Me Receipt For: Primary General Other (specify) ▼ Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		250.00	
City Newport Coast FEC ID number of contributing federal political committee. Name of Employer Newport Harbor Radiology Associates Me Receipt For: Primary General Other (specify) ▼ State Zip Code Transaction ID: 24503530 Amount of Each Receipt this Period 250.00 Aggregate Year-to-Date 7250.00	,		Date of Receipt
Newport Coast FEC ID number of contributing federal political committee. Name of Employer Newport Harbor Radiology Associates Me Receipt For: Primary General Other (specify) ▼ Amount of Each Receipt this Period 250.00 Accupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00			
FEC ID number of contributing federal political committee. Name of Employer Newport Harbor Radiology Associates Me Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	•	•	
Name of Employer Newport Harbor Radiology Associates Me Receipt For: Primary General Other (specify) ▼ Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼ 250.00		UA 92657-1231	Amount of Each Receipt this Period
Associates Me Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00		C	250.00
Primary General Other (specify) ▼ 250.00	Associates Me	Diagnostic Radiologist	
1000.00	Primary General		
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional)		1000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 90 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	I Statements may not be sold or used by any person he name and address of any political committee to	n for the purpose of soliciting contributions
American College of Radiology Asso	ociation	
Full Name (Last, First, Middle Initial) Dr. Jay Lichman Mailing Address 610 Kings Rd		Date of Receipt
City	State Zip Code	0 4 2 9 2 0 0 8 Transaction ID: 24503533
Newport Beach	CA 92663-5712	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer Newport Harbor Radiology Associates Receipt For: Primary General Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date 250.00	
Full Name (Last, First, Middle Initial) Dr. H Jay Zeskind Mailing Address 4870 Park Hill Dr		Date of Receipt
		04 29 2008
City	State Zip Code	Transaction ID: 24503538
West Bloomfield	MI 48323-3574	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer Diagnostic Radiology Cons- ultants, PC	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Dr. Arthur Sandy		Date of Receipt
Mailing Address 2821 Argyle Rd		04 30 7 2008
City	State Zip Code	Transaction ID: 24525326
Birmingham	AL 35213-3403	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Advanced Imaging Assoc of AL	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	400.00	
SUBTOTAL of Receipts This Page (optional)		750.00
	er only)	71110.83

S

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 90 (check only one) 11a 11b 11c 12 13 14 15 16 17 17
Any information copied from such Reports and for for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full)			
American College of Radiology Associated	ciation		
Full Name (Last, First, Middle Initial) Vanguard			Date of Receipt
Mailing Address PO Box 13750			04 30 7 2008
City	State	Zip Code	Transaction ID: 24687507
<u>Philadelphia</u>	PA	19101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		537.65
Name of Employer	Occupation	n	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 3027.26	Interest

SUBTOTAL of Receipts This Page (optional)	•	537.65
TOTAL This Period (last page this line number only)	•	537.65

SCHEDULE B (FEC Form 3X)		arate schedule(s)		OR LINI			₹:		PA	GE 74/	90	
ITEMIZED DISBURSEMENTS		category of the Summary Page		21b 27	Ĺ :	22 28a	X 23 28b		24 28c	25 29		26 30
Any Information copied from such Reports and Stater												
or for commercial purposes, other than using the name	ne and addres	ss of any political	commi	ttee to s	Olicit	contri	butions f	rom	such c	ommittee	!	
NAME OF COMMITTEE (In Full) American College of Radiology Association	on											
Full Name (Last, First, Middle Initial)					T .	ronor	action ID). O	1654	50		
Dent PAC						Date o	f Disburs	seme				
Mailing Address P.O. Box 40385						0 4	/ D	0 2	/ L	200	8 1	
City	State	Zip Code			1	Amour	nt of Eac	h Dis	burse	ment this	Peri	od
Washington	DC	20016				-		-		0500	00	
Purpose of Disbursement			0.4							2500.0	ΰO	
Candidate Name			O1 Cate	gory/								
Senate President	ement For: Primary Other (spe	General ccify) ▼	. ,									
State: District:												
Full Name (Last, First, Middle Initial) Leadership in the New Century (LINC PAGE)	C)						action ID f Disburs	_		45		
Mailing Address 818 Connecticut Avenue	e NW Ste.	110			[0 ^M 4	/ D	0 3	/ Y	žoŏ	8 ^Y	
City	State	Zip Code			1	Amour	nt of Eac	h Dis	burse	ment this	Peri	od
Washington	DC	20006			- 1					2500.0	00	
Purpose of Disbursement			01	1		-		-		2300.0	Ů0	
Candidate Name			Cate	gory/								
Office Sought: House Disburs Senate President State: District:	ement For: Primary Other (spe	General ♥	,									
Full Name (Last, First, Middle Initial)					٠,	rance	action ID	1. 2/	17000	24		
Pat Roberts For Senate						Date o	f Disburs	seme		-		
Mailing Address PO Box 433						0 4	/ D	0 3	/ Y	žoŏ	8 1	
City Cycot Rand	State	Zip Code			A	Amour	nt of Eac	h Dis	sburse	ment this	Peri	od
Great Bend	KS	67530			- [2000.0	00	
Purpose of Disbursement			01	1		-		-		2000.0	30	
Candidate Name Sen. Pat Roberts			Cate	gory/								
	ement For: C Primary Other (spe	2008 General	, , , , , , , , , , , , , , , , , , ,									
SUBTOTAL of Disbursements This Page (optional)				•						7000.0	00	
TOTAL This Period (last page this line number only					i	-		•	•	•	*	
E6AN026	·) ·······									m 3X) (Re	-	

		Use separate schedule(s	3))K LINE heck only		n.			PA	GE	75 / 9	0
<u>п</u>	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	22 28a	Х	23 28b		24 28c		25 29	
	y Information copied from such Reports and Staten or commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) American College of Radiology Associatio	e and address of any politica											
\mathbb{L}													
	Full Name (Last, First, Middle Initial) New Democrat Coalition PAC (NDC PAC)					Trans Date		isburs				0 ŏ 8	Y
	Mailing Address 607 14th Street NW Suite 800					04			0 4			000	
	City Washington	State Zip Code DC 20005				Amou	ınt o	f Each	n Dist	ourse	-	this P	-
	Purpose of Disbursement Candidate Name			01	1 gory/		_				25	500.00	J
		ement For: Primary General Other (specify)		Тур									
	Full Name (Last, First, Middle Initial) Rob Wittman For Congress					Trans Date					95		
	Mailing Address PO Box 999					0 ^M 4	М	/ D	0 8	/ Y	ž	8 ö́ 0	Y
	City Montross Purpose of Disbursement	State Zip Code VA 22520				Amou	int o	f Each	n Dist	ourse		this P	
	Candidate Name Mr. Robert Wittman			01 ateg	gory/		-						
		ement For: 2008 Primary General Other (specify)	•										
	Full Name (Last, First, Middle Initial) Richard E Neal For Congress Committee					Trans Date	of D	isburs	emer				
	Mailing Address 76 Magnolia Terrace					0 ^M 4	М	/ D	0 9	/ L	ž	8 0̈́ 0	Y
	City Springfield	State Zip Code MA 01108				Amou	ınt o	f Each	n Dist	ourse	ment	this P	erioc
	Purpose of Disbursement			01	1						10	00.00)
	Candidate Name Rep. Richard E. Neal			ateg Typ	gory/ be								
	Senate X President	ement For: 2008 Primary General Other (specify)	1										
	State: MA District: 02						_)

ITEMIZED F	B (FEC Form 3X)	Use separ	ate schedule(s)		NUMBER: PAGE 76 / 90
	DISBURSEMENTS	for each ca	ategory of the ummary Page	(check onl	y one) 22 X 23 24 25 28a 28b 28c 29 1
					for the purpose of soliciting contributions olicit contributions from such committee
\ \	MMITTEE (In Full) ollege of Radiology Associati	on			
Full Name (Las Next Century	st, First, Middle Initial) r Fund				Transaction ID: 24165455 Date of Disbursement
Mailing Addres	s 116 S Royal Street				$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Alexandria		State VA	Zip Code 22314		Amount of Each Disbursement this Perio
Purpose of Dis				011	5000.00
Candidate Nan				Category/ Type	
Office Sought:	Senate President	Primary Other (spec	General ▼		
•	District: st, First, Middle Initial) National Committee				Transaction ID: 24173794 Date of Disbursement
Mailing Addres		 east			0 4 D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington		State DC	Zip Code 20003		Amount of Each Disbursement this Perio
Purpose of Dis	bursement			011	7500.00
Candidate Nan	ie			Category/ Type	
Office Sought:	House Disbur Senate President	rsement For: Primary Other (spec	General ify) ▼		
Chahai					
•	District: st, First, Middle Initial) National Committee				Transaction ID: 24173795 Date of Disbursement
Full Name (Las	District: st, First, Middle Initial) National Committee	ast			
Full Name (Las Republican I	District: st, First, Middle Initial) National Committee		Zip Code 20003		Date of Disbursement M 4 M / D 9 / Y 2 0 0 8 Amount of Each Disbursement this Period
Full Name (Las Republican I Mailing Addres City Washington Purpose of Dis	District: st, First, Middle Initial) National Committee s 310 First Street Souther bursement	State		011	Date of Disbursement O 4 D O 9 Y Y Y O 0 8
Full Name (Las Republican I Mailing Addres City Washington Purpose of Dis Candidate Nam	District: st, First, Middle Initial) National Committee s 310 First Street Souther bursement	State DC		011 Category/ Type	Date of Disbursement M 4 M / D 9 / Y 2 0 0 8 Y Amount of Each Disbursement this Perio
Full Name (Las Republican I Mailing Addres City Washington Purpose of Dis	District: st, First, Middle Initial) National Committee s 310 First Street Souther bursement	State	20003 General	Category/	Date of Disbursement M 4 M / D 9 / Y 2 0 0 8 Y Amount of Each Disbursement this Period

SCHEDIII F B (FEC Form 3Y)

	Use separate schedule(s	(check only	NUMBER: PAGE 77 / 90
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
Any Information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full) American College of Radiology Associati	on		
Full Name (Last, First, Middle Initial) National Republican Senatorial Committe	ee		Transaction ID: 24173790 Date of Disbursement
Mailing Address 425 Second Street Nor	heast		$\begin{bmatrix}\begin{smallmatrix}M&4&M\\0&4&M\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&D&D\\0&9\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y\\2&0&0&8\end{smallmatrix}\end{bmatrix}$
City Washington	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement		011	7500.00
Candidate Name		Category/ Type	
Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial)			Transaction ID: 24173791
National Republican Senatorial Committe	ee		Date of Disbursement
Mailing Address 425 Second Street Nor	heast		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 9 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y \\ 2 & O & 0 & 8 \end{smallmatrix} $
City Washington	State Zip Code DC 20002		Amount of Each Disbursement this Period
Purpose of Disbursement		011	7500.00
Candidate Name		Category/ Type	
Office Sought: Senate President State: Disbur	sement For: Primary General Other (specify) ▼	•	
Full Name (Last, First, Middle Initial) Committee for a Democratic Majority			Transaction ID: 24158848 Date of Disbursement
Mailing Address 301 4th Street Northea Suite 202	st Suite 20		$\begin{bmatrix} \begin{smallmatrix} M & A & M \\ O & A & M \end{smallmatrix} & \begin{smallmatrix} D & O & D \\ O & O & O \end{smallmatrix} & \begin{smallmatrix} Y & Y & Y & Y & Y & X \\ Z & O & O & S & Y \end{bmatrix}$
City Washington	State Zip Code DC 20002		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	2500.00
Candidate Name		Category/ Type	
Senate President	sement For: Primary General Other (specify) ▼		
State: District:			
otate. Biotriot.			17500.00

TEMIZED DISBU	EC Form 3X) RSEMENTS		arate schedule(s) category of the		Check or	E NUMBE nly one)	:R:	_ P	AGE 78	90
		Detailed	Summary Page		21b 27	22 28a	X 23 28b	24 28c		
iny Information copied from r for commercial purposes										
NAME OF COMMITTE			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
Full Name (Last, First, M Allyson Schwartz Fo	,						action ID of Disburs	-	980	
Mailing Address P.	O. Box 2232					0 ^M 4	M / D	9 /	žoč	ว์ 8 ั
City Jenkintown		State PA	Zip Code 19046			Amou	int of Each	Disburs		-
Purpose of Disburseme	nt)11	L.			1000	0.00
Candidate Name Rep. Allyson Schwa	rtz			Cat	egory/ ype					
F	Senate President	sement For: Primary Other (sp	2008 X General ecify) V							
State: PA Distr	rict: 13					+		0.4000	70	
, , ,	Team PAC (HEAT	PAC)				Date	action ID of Disburs	ement		
	9 S CAPITOL ST SV E 412	V				0 ^M 4	M / D	9 /	žoč	8
City WASHINGTON		State DC	Zip Code 20003			Amou	int of Each	Disburs	ement thi	s Peri
Purpose of Disburseme	nt)11	T L.			5000	0.00
Candidate Name				Cat	egory/ ype					
F	Senate President	sement For: Primary Other (sp	General ecify) ▼							
State: Distr						 _		0.44.054		
Schultz Debbie Was	•						of Disburs			/
Mailing Address 10	71 Twin Branch Ln					0 4		9	žoò	8
City Weston		State FL	Zip Code 33326			Amou	int of Each	Disburs		
Purpose of Disburseme	nt			()11	L.			2500	0.00
Candidate Name Rep. Debbie Wasse	rman-Schultz			Cat	egory/ ype					
		sement For: X Primary	2008 General							
	rict: 20	Other (sp	ecity) 🔻							
	'									

SCHEDIII F B (FEC Form 3Y)

	State Zip Code DC 20003 Stement For: 2008 Cement For: Gener Other (specify)	ge 21 27 sed by any perical committee 011 Category, Type	Transaction ID: 24165460 Date of Disbursement this Per Amount of Each Disbursement this Per Transaction ID: 24171042 Date of Disbursement
or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) American College of Radiology Association Full Name (Last, First, Middle Initial) Gillibrand For Congress Mailing Address P.O. Box 15734 City Washington Purpose of Disbursement Candidate Name Rep. Kirsten Gillibrand Office Sought: X House Senate President State: NY District: 20 Full Name (Last, First, Middle Initial)	State Zip Code DC 20003 Stement For: 2008 Cement For: Gener Other (specify)	011 Category, Type	Transaction ID: 24165460 Date of Disbursement May Mark 1000.00 Amount of Each Disbursement this Per 1000.00 Transaction ID: 24171042 Date of Disbursement
American College of Radiology Association Full Name (Last, First, Middle Initial) Gillibrand For Congress Mailing Address P.O. Box 15734 City Washington Purpose of Disbursement Candidate Name Rep. Kirsten Gillibrand Office Sought: X House Senate President State: NY District: 20 Full Name (Last, First, Middle Initial)	State Zip Code DC 20003 sement For: 2008 Primary Gener Other (specify)	Category, Type	Date of Disbursement M M M / D D D / Y Y Y O Y 8 Y Amount of Each Disbursement this Per 1000.00 Transaction ID: 24171042 Date of Disbursement
Gillibrand For Congress Mailing Address P.O. Box 15734 City Washington Purpose of Disbursement Candidate Name Rep. Kirsten Gillibrand Office Sought: X House Disburs Senate President State: NY District: 20 Full Name (Last, First, Middle Initial)	DC 20003 sement For: 2008 C Primary Gener Other (specify)	Category, Type	Date of Disbursement M M M / D D D / Y Y Y O Y 8 Y Amount of Each Disbursement this Per 1000.00 Transaction ID: 24171042 Date of Disbursement
Gillibrand For Congress Mailing Address P.O. Box 15734 City Washington Purpose of Disbursement Candidate Name Rep. Kirsten Gillibrand Office Sought: X House Senate President State: NY District: 20 Full Name (Last, First, Middle Initial)	DC 20003 sement For: 2008 C Primary Gener Other (specify)	Category, Type	Date of Disbursement M M M / D D D / Y Y Y O Y 8 Y Amount of Each Disbursement this Per 1000.00 Transaction ID: 24171042 Date of Disbursement
City Washington Purpose of Disbursement Candidate Name Rep. Kirsten Gillibrand Office Sought: X House Senate President State: NY District: 20 Full Name (Last, First, Middle Initial)	DC 20003 sement For: 2008 C Primary Gener Other (specify)	Category, Type	Amount of Each Disbursement this Per 1000.00 Transaction ID: 24171042 Date of Disbursement
Washington Purpose of Disbursement Candidate Name Rep. Kirsten Gillibrand Office Sought: X House Senate President State: NY District: 20 Full Name (Last, First, Middle Initial)	DC 20003 sement For: 2008 C Primary Gener Other (specify)	Category, Type	Transaction ID: 24171042 Date of Disbursement
Purpose of Disbursement Candidate Name Rep. Kirsten Gillibrand Office Sought: X House Senate President State: NY District: 20 Full Name (Last, First, Middle Initial)	C Primary Gener Other (specify) ▼	Category, Type	Transaction ID: 24171042 Date of Disbursement
Rep. Kirsten Gillibrand Office Sought: X House Senate President State: NY District: 20 Full Name (Last, First, Middle Initial)	C Primary Gener Other (specify) ▼	Category, Type	Transaction ID: 24171042 Date of Disbursement
Senate President State: NY District: 20 Full Name (Last, First, Middle Initial)	C Primary Gener Other (specify) ▼	al	Date of Disbursement
Full Name (Last, First, Middle Initial)	Action		Date of Disbursement
Prosperity Helps Inspire Liberty Political A	Action		Date of Disbursement
			M M / D D / Y Y Y
Mailing Address PO Box 26366			04
City Alexandria	State Zip Code VA 22313		Amount of Each Disbursement this Per
Purpose of Disbursement		011	1000.00
Candidate Name		Category, Type	
Office Sought: House Disburs Senate President State: District:	sement For: Primary Gener Other (specify) ▼	al	
Full Name (Last, First, Middle Initial) Andre Carson For Congress			Transaction ID: 24332324 Date of Disbursement
Mailing Address 2527 North Alabama St	reet		04
City Indianapolis	State Zip Code IN 46205		Amount of Each Disbursement this Per
Purpose of Disbursement		011	2500.00
Candidate Name Andre Carson		Category, Type	
Senate >	sement For: 2008 ⟨ Primary Gener Other (specify) ▼		
State: IN District: 07 SUBTOTAL of Disbursements This Page (optional)			4500.00

		Use separate schedule(s)			R LINE eck only		٠			1 //	iE 80 /	50
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	_	Ì	21b 27	22 28a	Х	23 28b	\square	24 28c	25 29	
	y Information copied from such Reports and State for commercial purposes, other than using the name NAME OF COMMITTEE (In Full) American College of Radiology Association	e and address of any political										s
V_	Full Name (Last, First, Middle Initial) Cote For Congress Mailing Address PO Box 6902					Trans Date o		sburs	_	-	6 Ž 0 Ď 8	3 ^Y
	City Portland Purpose of Disbursement	State Zip Code ME 04105				Amou	nt of	Each	Disbu	ursem	ent this 5000.0	
	Candidate Name Mr. Adam Cote	2000	Cat	011 tego ype								
	Senate President State: ME District: 01	ement For: 2008 Primary General Other (specify)										
	Full Name (Last, First, Middle Initial) Nathan Deal For Congress Mailing Address PO Box 902					Trans Date o			ement		9 Ž 0 Ď 8	8 ^Y
	City Gainesville Purpose of Disbursement	State Zip Code GA 30503		011		Amou	nt of	f Each	Disbu	ursem	ent this 2500.0	
	Candidate Name Rep. Nathan Deal		Cat	tego	ory/							
	9 1	ement For: 2008 Primary General Other (specify)										
	Full Name (Last, First, Middle Initial) Mike Thompson For Congress					Trans Date	of Di	sburs	ement			
	Mailing Address 5429 Madison Avenue					0 ^M 4	M	1	5	L	žoós	3 ^Y
	City Sacramento	State Zip Code CA 95841				Amou	nt of	Each	Disbu	ırsem	ent this	
	Purpose of Disbursement Candidate Name Rep. Michael Thompson		Cat	011 tego ype	ry/		•	•		•	2500.0	JU
	X	ement For: 2008 Primary General Other (specify)										
Г	UBTOTAL of Disbursements This Page (optional)						_			- 1	0.000	· · · · ·

ITELLIZED BIODICECTOR	Use separate schedule(3)		₹ LINE eck only	one)						81 / 9	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		$\stackrel{\cdot}{\Box}$:	21b 27	22 28a	X	23 28b	\square	24 28c		25 29	2
Any Information copied from such Reports and Stor for commercial purposes, other than using the result of NAME OF COMMITTEE (In Full) American College of Radiology Association	ame and address of any politic											
/	uion											
Full Name (Last, First, Middle Initial) John Sullivan For Congress Inc Mailing Address Post Office Box 4708	40				Date of 0 4			_			o ŏ 8	Y
City Tulsa	State Zip Code OK 74147				Amou	int o	f Each	n Disk	ourse	-	this P	-
Purpose of Disbursement Candidate Name		-	011						•	10	00.00)
Rep. John Sullivan			tego Гуре	ry/								
Office Sought: X House Senate President State: OK District: 01	ursement For: 2008 X Primary General Other (specify) ▼											
Full Name (Last, First, Middle Initial)					Trans	anti	on ID	. 241	500	10		
Committee for Hispanic Causes (CHC	Bold PAC)				Date of		sburs	emer			0 ŏ 8	Υ
Mailing Address 1831 Bay Street SE					0 4			1 5	L	. 2	0 0 8	
City Washington	State Zip Code DC 20003				Amou	int o	f Each	n Disk	ourse		this P	-
Purpose of Disbursement Candidate Name		Ca	011 itego Γype	ry/		-	•	•		40	00.00	,
Office Sought: House Disb Senate President State: District:	rrsement For: Primary General Other (specify) ▼	<u> </u>	урс									
Full Name (Last, First, Middle Initial) Friends Of Jim Marshall					Trans Date	of D	sburs	emer				
Mailing Address 586 Orange Street					0 ^M 4	М	/ D	15	/ L	ž	8 Ó 0	Y
City Macon	State Zip Code GA 31201				Amou	int o	f Each	n Disk	ourse	-	this P	-
Purpose of Disbursement			011							20	00.00)
Candidate Name Rep. Jim Marshall			tego Type									
Senate President	xrsement For: 2008 X Primary General Other (specify) ▼	1	<u> </u>									
State: GA District: 08												

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	22 X 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name		by any person fo	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
American College of Radiology Association	ו		
Full Name (Last, First, Middle Initial) Pete Stark Re-Election Committee			Transaction ID: 24173796 Date of Disbursement
Mailing Address P.O. Box 8331			$\begin{bmatrix} 0 & 4 & M \\ 0 & 4 & M \end{bmatrix} / \begin{bmatrix} 0 & 1 & 6 \\ 1 & 6 \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 & 0 \\ 0 & 2 & 0 & 0 & 0 \end{bmatrix}$
City Fremont	State Zip Code CA 94537		Amount of Each Disbursement this Period
Purpose of Disbursement		011	1000.00
Candidate Name Rep. Fortney Peter Stark		Category/ Type	
Senate President	ment For: 2008 Primary X General Other (specify)		
State: CA District: 13			
Full Name (Last, First, Middle Initial) Pete Stark Re-Election Committee			Transaction ID: 24332741 Date of Disbursement
Mailing Address P.O. Box 8331			04
City Fremont	State Zip Code CA 94537		Amount of Each Disbursement this Period
Purpose of Disbursement		011	1000.00
Candidate Name Rep. Fortney Peter Stark		Category/ Type	
Office Sought: X House Disburse Senate President	ment For: 2008 Primary X General Other (specify)		
State: CA District: 13			
Full Name (Last, First, Middle Initial) Porter For Congress			Transaction ID: 24334126 Date of Disbursement
Mailing Address PO Box 26087			$\begin{bmatrix} 0 & 4 & M \\ 0 & 4 & M \end{bmatrix} / \begin{bmatrix} 0 & 1 & 6 \\ 0 & 1 & 6 \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 & 0 \\ 0 & 2 & 0 & 0 & 0 \end{bmatrix}$
City Las Vegas	State Zip Code NV 89126		Amount of Each Disbursement this Period
Purpose of Disbursement		011	2000.00
Candidate Name Rep. Jon C. Porter		Category/ Type	
Senate X President	ement For: 2008 Primary General Other (specify)		
State: NV District: 03			
SUBTOTAL of Disbursements This Page (optional))	4000.00

TOTAL This Period (last page this line number only)

		Use separate sc			OR LINE heck only		٠		L		83/9	,
1T	EMIZED DISBURSEMENTS	for each categor Detailed Summa			21b 27	22 28a	X	23 28b	24 28		25 29	
	y Information copied from such Reports and Stater for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	e and address of an										
\angle	American College of Radiology Association	n 										
	Full Name (Last, First, Middle Initial) Radanovich For Congress Mailing Address 30151 Tomas Street					Date o		sburse	D /		ž 0 0 8	Y
	City Rancho Sta Mrgrita	State Zip C CA 9268				Amou	nt of	Each	Disbu	rseme	nt this F	Perioc
	Purpose of Disbursement			01			-	•		. 1	000.0	0
	Candidate Name Rep. George P. Radanovich			Cate Ty	gory/ pe							
	Office Sought: X House Senate President State: CA District: 19		2008 General									
	Full Name (Last, First, Middle Initial)					Trans	actio	nn ID:	2433	4384		
	Christopher Shays For Congress Commit					Date o		sburse			ž o ŏ 8	Y
	Mailing Address 98 East Avenue Rear Bu	illding				0 4		<u> </u>	1		2000	
	City Norwalk	State Zip C CT 0685				Amou	nt of	Each	Disbu		nt this F	
	Purpose of Disbursement Candidate Name Rep. Christopher Shays		[gory/			0			2500.0	U
	Office Sought: X House Disburs		2008 General	Ту	ρe							
	Full Name (Last, First, Middle Initial) Anna Eshoo For Congress					Date o	of Dis	sburse				
	Mailing Address 555 Capitol Mall Suite 1	425				0 ^M 4	M /	^D 1	7 /	¥ 2	ž o ŏ 8	3
	City Sacramento	State Zip C CA 9581				Amou	nt of	Each	Disbu		nt this F	-
	Purpose of Disbursement			01	11					2	2500.0	0
	Candidate Name Rep. Anna G. Eshoo			Cate Ty	gory/ pe							
	Office Sought: X House Disburs Senate		2008 General		•							
	President State: CA District: 14	Other (specify)	7									

IT	CHEDULE B (FEC Form 3	use sepa	arate schedule(s)	FOR LINE	
	EMIZED DISBURSEMENT		category of the ´ Summary Page	(check only	22 X 23 24 25
	y Information copied from such Reports a for commercial purposes, other than using				
\rangle	NAME OF COMMITTEE (In Full) American College of Radiology As				
	Full Name (Last, First, Middle Initial) Jim Gerlach For Congress Comm	ttee			Transaction ID: 24173786 Date of Disbursement
	Mailing Address PO Box 87				$\begin{bmatrix}\begin{smallmatrix}M&A&M\\O&A&M\end{smallmatrix}\end{bmatrix} \ / \ \begin{bmatrix}\begin{smallmatrix}D&D&D\\I&7\end{smallmatrix}\end{bmatrix} \ / \ \begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Q&N\\2&0&0&8\end{smallmatrix}\end{bmatrix} $
	City Uwchland	State PA	Zip Code 19480		Amount of Each Disbursement this Period
	Purpose of Disbursement			011	2000.00
	Candidate Name Rep. James W. Gerlach	Disbursement For:	0000	Category/ Type	
	Office Sought: X House Senate President State: PA District: 06	Primary Other (spe	2008 X General ecify) ▼		
	Full Name (Last, First, Middle Initial) Allyson Schwartz For Congress			Transaction ID: 24334220 Date of Disbursement	
	Mailing Address P.O. Box 2232				$\begin{bmatrix}\begin{smallmatrix}M&M&M\\0&4&M\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&1&D\\1&7\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Q&N&N\\2&0&0&8&N\end{smallmatrix}\end{bmatrix}$
	City Jenkintown	State PA	Zip Code 19046		Amount of Each Disbursement this Period
					1000.00
	Purpose of Disbursement			011	
	Purpose of Disbursement Candidate Name Rep. Allyson Schwartz			011 Category/ Type	
	Candidate Name Rep. Allyson Schwartz Office Sought: X House Senate President	Disbursement For: Primary Other (spe	2008 X General ecify) ▼	Category/	
	Candidate Name Rep. Allyson Schwartz Office Sought: X House Senate President State: PA District: 13 Full Name (Last, First, Middle Initial)	Primary	X General	Category/	Transaction ID: 24375601
	Candidate Name Rep. Allyson Schwartz Office Sought: X House Senate President State: PA District: 13 Full Name (Last, First, Middle Initial) Cazayoux For Congress	Primary	X General	Category/	Date of Disbursement
	Candidate Name Rep. Allyson Schwartz Office Sought: X House Senate President State: PA District: 13 Full Name (Last, First, Middle Initial) Cazayoux For Congress Mailing Address Pob 156	Primary	X General ecify) ▼	Category/	Date of Disbursement M 4 M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Candidate Name Rep. Allyson Schwartz Office Sought: X House Senate President State: PA District: 13 Full Name (Last, First, Middle Initial) Cazayoux For Congress	Primary Other (spe	X General	Category/	Date of Disbursement M 4 M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Candidate Name Rep. Allyson Schwartz Office Sought: X House Senate President State: PA District: 13 Full Name (Last, First, Middle Initial) Cazayoux For Congress Mailing Address Pob 156 City New Roads	Primary Other (spe	X General ecify) ▼ Zip Code	Category/	Date of Disbursement M 4 M / D 1 8 / Y 2 0 0 8 Y Amount of Each Disbursement this Period
	Candidate Name Rep. Allyson Schwartz Office Sought: X House Senate President State: PA District: 13 Full Name (Last, First, Middle Initial) Cazayoux For Congress Mailing Address Pob 156 City New Roads Purpose of Disbursement Candidate Name Mr. Donald Cazayoux Office Sought: X House Senate President	Primary Other (spe	X General ecify) ▼ Zip Code 70760 2008 General	Category/ Type 011 Category/	Date of Disbursement M 4 M / D 1 8 / Y 2 0 0 8 Y Amount of Each Disbursement this Period
	Candidate Name Rep. Allyson Schwartz Office Sought: X House Senate President State: PA District: 13 Full Name (Last, First, Middle Initial) Cazayoux For Congress Mailing Address Pob 156 City New Roads Purpose of Disbursement Candidate Name Mr. Donald Cazayoux Office Sought: X House Senate	State LA Disbursement For: X Primary	X General ecify) ▼ Zip Code 70760 2008 General	Category/ Type 011 Category/	Date of Disbursement M 4 M / D 1 8 / Y 2 0 0 8 Y Amount of Each Disbursement this Perio

SCHEDIII F B (FEC Form 3Y)

·	FOIIII 3A)	Use separate schedule	(S) (check	_INE NUMBER: < only one)	PAGE 85 / 90
ITEMIZED DISBURS		for each category of the Detailed Summary Pag	ge 21	b 22 X 23 28a 28	3b 28c 29
Any Information copied from sucor for commercial purposes, oth					
NAME OF COMMITTEE (In	n Full)				
American College of Ra	adiology Association				
Full Name (Last, First, Midd John Kerry For Senate	lle Initial)			Transaction Date of Disb	ID: 23425502
				M M /	20 2008
Mailing Address 10 G Suite	Street Ne 710			0 4	20 2008
City Washington	Sta DO			Amount of E	ach Disbursement this Period
Purpose of Disbursement				╗ ┗	1500.00
Candidate Name Sen. John Kerry			011 Category	′	
Office Sought: House	ate X P	rimary Gener	Type al		
State: MA District:		ther (specify)			
Full Name (Last, First, Midd	lle Initial)			Transaction	ID : 23425503
John Kerry For Senate				Date of Disb	
Mailing Address 10 G Suite	Street Ne 710			0 4	
City Washington	Sta D0			Amount of E	ach Disbursement this Period
Purpose of Disbursement			011	7	5000.00
Candidate Name Sen. John Kerry			Category		
Office Sought: Hous	ate P	ent For: 2008 rimary X Gener ther (specify) ▼	al		
State: MA District:					
Full Name (Last, First, Midd Campaign for our Coun	,			Transaction Date of Disb	
Mailing Address 10 G Suite	Street NE 710			0 4 1	$\begin{bmatrix} 2 & 0 \\ 2 & 0 \end{bmatrix}$ $\begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix}$
City Washington	Sta D0			Amount of E	ach Disbursement this Period
Purpose of Disbursement			011	7 L	5000.00
Candidate Name			Category Type		
	ate P	ent For: rimary Gener ther (specify)	al		
State: District:					
					11500.00

,		Use separate schedule	s)	(cl	heck only	one)							0
П _	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	e	Ė	21b 27	22 28a	X	23 28b	\Box	24 28c		25 29	2 3
	y Information copied from such Reports and States for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full)	ne and address of any polition											
\mathbb{Z}	American College of Radiology Association												
	Full Name (Last, First, Middle Initial) Leadership in the New Century (LINC PAGental Mailing Address 818 Connecticut Avenue	<i>,</i>				Trans Date		sburs				0 ŏ 8	Y
						A			Dist			D	
	City Washington	State Zip Code DC 20006				Amou	int o	Eacr	DISC	ourse	-	this P	-
	Purpose of Disbursement Candidate Name			01	1 gory/				•		25	500.00)
	Office Sought: House Disburs	ement For: Primary General Other (specify)		Тур									
	Full Name (Last, First, Middle Initial)					Trans	acti	on ID	: 241	7378	34		
	More Conservatives PAC (McPAC)					Date o	of Di			nt / Y	Υ	Y	Υ
	Mailing Address 675 N WASHINGTON S SUITE 410					0 4		2	23	L	2	8 ö́ 0	
	City ALEXANDRIA	State Zip Code VA 22314				Amou	int o	Each	n Dist	ourse	ment	this P	eriod
	Purpose of Disbursement Candidate Name		C	01 ateg	gory/			•			25	500.00)
	Office Sought: House Disburs	ement For: Primary General Other (specify)	ı I										
	Full Name (Last, First, Middle Initial) Vern Buchanan For Congress					Trans Date	of D	sburs	emen				
	Mailing Address P. O. Box 48928					0 ^M 4	М	D 2	24	/ L	Ž	8 ö́ 0	1
	City Sarasota	State Zip Code FL 34230				Amou	int o	Each	n Dist	ourse	ment	this P	eriod
	Purpose of Disbursement			01	1			_			10	00.00)
	Candidate Name Rep. Vern Buchanan			i	gory/								
	Senate President	ement For: 2008 Primary General Other (specify)		71									
	State: FL District: 13												

		Use separate schedule(s)		OR LINE I check only		١.		L	1 Au	= 87/9	90
IT _	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 28a		23 28b	—	4 8c	25 29	<u> </u>
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) American College of Radiology Associatio	e and address of any political co									3
\mathbb{L}		ı									
	Full Name (Last, First, Middle Initial) Souder For Congress Inc. Mailing Address P.O. Box 40233				Date of 0 4		sburse			ž 0 ŏ 8	3 Y
	City	State Zip Code			Amou	nt of	Each	Disbu	ırseme	ent this F	Period
	Fort Wayne	IN 46804			-	-			-	-	-
	Purpose of Disbursement Candidate Name	[01 Cata			_				2000.0	U
	Rep. Mark Souder	,	Ту	gory/ pe							
	Office Sought: X House Disburse Senate President State: IN District: 03	ement For: 2008 Primary X General Other (specify)									
_	Full Name (Last, First, Middle Initial)				Trans	aatid	n ID:	2/15	0120		
	America Works PAC				Date o		sburse	-		ž 0 ŏ 8	Y
	Mailing Address PO Box 76187 Suite 800				0 4	_		5		2008	5
	City Washington	State Zip Code DC 20013			Amou	nt of	Each	Disbu		ent this F	
	Purpose of Disbursement Candidate Name	[gory/						5000.0	U
	Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)	Ту	pe							
	Full Name (Last, First, Middle Initial) National Leadership Pac				Trans	of Dis	sburse	ement			
	Mailing Address PO Box 5577				0 4	M /	^D 2	6	Y	ž 0 ŏ 8	3 ^Y
	City New York	State Zip Code NY 10027			Amou	nt of	Each	Disbu	ırseme	ent this F	Period
	Purpose of Disbursement	01	11						2500.0	0	
	Candidate Name			gory/							
	Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)									
	2.5									500.0	

ny In r for c	nformation copie commercial pur AME OF COMM merican Colle Ill Name (Last, I ikulski For Se ailing Address		and Statemering the name a	Detailed :			any p		22 28a for the policit cont	urpos tributio	ons for ID sburs	soliciti rom s	74492	ntribut ommit	tee	
Fu Mi Ma Cittle Ba Case	AME OF COMM merican Collectual Name (Last, I ikulski For Se ailing Address ty altimore urpose of Disbu	poses, other than using poses,	ng the name and association	and addres	ss of any politica				Tran Date	saction of Dis	ons for ID sburs	rom s 0: 237 semer	74492	ommit	tee	
Fu Mi Maa Citt Baa Pu Caa See	AME OF COMMerican Collection Name (Last, I ikulski For Sealling Address ty altimore surpose of Disburandidate Name en. Barbara A	P O B 13147	Association	ate					Tran Date	saction of Dis	on ID): 237	74492 nt			_
Fu Mi Ma Cit Ba Pu Case	merican Collecture Name (Last, I ikulski For Sealing Address ty altimore surpose of Disburandidate Name en. Barbara A	ege of Radiology A First, Middle Initial) enate Committee POB13147	St		Zin Code				Date	of Dis	sburs	semer	nt	23		_
Mi Ma Cit Ba Pu Ca Se	ikulski For Seailing Address ty altimore urpose of Disbuendidate Name en. Barbara A	P O B 13147			Zin Code				Date	of Dis	sburs	semer	nt	23		_
Mi Ma Cit Ba Pu Ca Se	ikulski For Seailing Address ty altimore urpose of Disbuendidate Name en. Barbara A	P O B 13147			Zin Code				Date	of Dis	sburs	semer	nt	23		
Cit Ba Pu Ca Se	ty altimore urpose of Disbu andidate Name en. Barbara A	rsement			Zin Code					M /	/ D	D.				
Pu Ca Se	altimore urpose of Disbu andidate Name en. Barbara <i>A</i>				Zin Code				0 4			28	/ Y	ž 0	8 0	Y
Pu	urpose of Disbu andidate Name en. Barbara A				21203				Amo	unt of	Eacl	h Disk	ourser	nent th	his P	erio
Se	en. Barbara <i>A</i>				21200			_						250	0.00)
Se	en. Barbara <i>A</i>						011									
_	ffice Sought:	A. Mikulski					atego Type	-								
Of		House	Disbursem		2010											
		χ Senate President		Primary Other (spe	General											
St	ate: MD	District:		outer (Spe	5011 y) ▼											
	,	First, Middle Initial)	•						Tran	sactio	on ID): 244	8619	96		
Cł	harlie Dent Fo	or Congress							Date			semer	nt			
Ma	ailing Address	PO Box 442							0 ^M 4	M /	D	29	/ L	ž o	8 0	Y
Cit				ate	Zip Code				Amo	unt of	Eacl	h Dist	ourser	nent th	his P	erio
_	lentown urpose of Disbu	reamant	P.	Α	18105									100	0.00)
_	il pose oi Disbu	i semeni					011			-						_
	andidate Name ep. Charles V	V Dent					atego	•								
	ffice Sought:	χ House	Disbursem	ent For:	2008		Турє)								
٠.		Senate	F	Primary	X General											
Q+	ate: PA	President District: 15		Other (spe	ecify) 🔻											
		First, Middle Initial)	L						Tran	canti	on ID): 244	18010	2Ω		
		Re-Elect Artur Da	vis To Cong	ress, Th	ne							semer		00		
Ma	ailing Address	PO Box 1845							o ^M 4	M /	D	29	/ Y	ž 0	8 0	Υ
Cit Bi	ty rmingham		St A	ate L	Zip Code 35201				Amo	unt of	Eacl	h Disk	ourser	nent th	his Po	eric
	rpose of Disbu	rsement					v	$\overline{}$	L					200	0.00)
<u></u>	andidate Name					_	011									
	andidate Name ep. Artur Dav	is					atego Type									
Of	ffice Sought:	X House Senate		Primary	2008 General	1										
St	ate: AL	President District: 07		Other (spe	ecity) 🔻											
																_

TEMES DISCUSSION	Use separate schedule(s		LINE NUMBE (only one)	.n.	[F F	AGE 89/9	90
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21	b 22	X 23 28b	24 28c	25 29	
Any Information copied from such Reports and State or for commercial purposes, other than using the national NAME OF COMMITTEE (In Full) American College of Radiology Association	ame and address of any politica						5
Full Name (Last, First, Middle Initial) Jo Bonner For Congress Committee Mailing Address P.O. Box 851232			Date	saction ID: of Disburse	-	79 2 0 0 8	3 Y
City Mobile	State Zip Code AL 36685		Amou	unt of Each	Disburse		
Purpose of Disbursement Candidate Name Rep. Jo Bonner		011 Category Type				2500.0	0
Office Sought: X House Senate President State: AL District: 01	x Primary General Other (specify)	, ,,					
Full Name (Last, First, Middle Initial) Mcconnell Senate Committee '08 Mailing Address PO Box 1496			Date	saction ID: of Disburse		43 ´ ž 0 ŏ 8	3 ^Y
City Louisville Purpose of Disbursement	State Zip Code KY 40201	044	Amou	unt of Each	Disburse	ment this F	
Candidate Name Sen. Mitch McConnell		011 Category Type					
Office Sought: House Disbute X Senate President State: KY District:	rsement For: 2008 X Primary General Other (specify)						
Full Name (Last, First, Middle Initial) Team Sununu			Date	saction ID: of Disburse	ement		V
Mailing Address PO Box 500			0 ^M 4	м / В	0 /	Ž 0 Ŏ 8	3
City Rye	State Zip Code NH 03870		Amou	unt of Each	Disburse	ment this F	-
Purpose of Disbursement Candidate Name Sen. John E. Sununu		011 Category Type	7 -			1500.0	U
Office Sought: House Disbute	rsement For: 2008 X Primary General Other (specify)						
SUBTOTAL of Disbursements This Page (options	al)		L			6500.0	0
TOTAL This Period (last page this line number or			<u> </u>		1	36000.0	0

~				
5(CHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 90/90
Τ	EMIZED DISBURSEMENTS	for each category of the	(check only	
		Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c X 29 30b
	y Information copied from such Reports and Stater or commercial purposes, other than using the name	,	• •	, ,
<u> </u>	NAME OF COMMITTEE (In Full)			
	American College of Radiology Association	n		
	Full Name (Last, First, Middle Initial)			Transaction ID: 24687510
	Bank of America			Date of Disbursement
	Mailing Address P.O. Box 27025			04 4 7 3 0 7 2 0 0 8
	City Richmond	State Zip Code VA 23261-7025		Amount of Each Disbursement this Period
	Purpose of Disbursement Bank Fees		001	881.43
	Candidate Name		Category/ Type	
	Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)		Bank Fees
	State: District:			

SUBTOTAL of Disbursements This Page (optional)	>	881.43
TOTAL This Period (last page this line number only)	•	881.43